

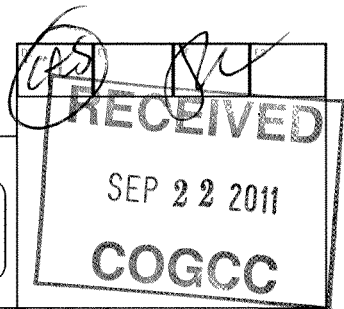


02203487

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109



SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

Complete the Attachment Checklist

OP OGCC

1. OGCC Operator Number: 96850	4. Contact Name: Howard Harris	Survey Plat	
2. Name of Operator: Williams Production RMT Company LLC	Phone: 303-606-4086		
3. Address: 1001 17th St., Suite 1200	Fax: 303-629-8268	Directional Survey	X
City: Denver State: CO Zip: 80202		Surface Eqpmt Diagram	
5. API Number 05-045-19708-00	OGCC Facility ID Number	Technical Info Page	X
6. Well/Facility Name: Federal	7. Well/Facility Number SP 432-14	Other	
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): SWNE Sec 14 T7S-R95W			
9. County: Garfield	10. Field Name: Parachute		
11. Federal, Indian or State Lease Number: COC05173			

General Notice

☐ **CHANGE OF LOCATION:** Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit)

Change of Surface Footage from Exterior Section Lines:		FNL/FSL		FEL/FWL
Change of Surface Footage to Exterior Section Lines:				
Change of Bottomhole Footage from Exterior Section Lines:				
Change of Bottomhole Footage to Exterior Section Lines:				

Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer _____ attach directional survey

Latitude _____ Distance to nearest property line _____ Distance to nearest bldg, public rd, utility or RR _____

Longitude _____ Distance to nearest lease line _____ Is location in a High Density Area (rule 603b)? Yes/No ☐

Ground Elevation _____ Distance to nearest well same formation _____ Surface owner consultation date: _____

GPS DATA:

Date of Measurement _____ PDOP Reading _____ Instrument Operator's Name _____

☐ **CHANGE SPACING UNIT**

Formation	Formation Code	Spacing order number	Unit Acreage	Unit configuration

☐ **Remove from surface bond**
Signed surface use agreement attached

<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling): Effective Date: _____ Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual	<input type="checkbox"/> CHANGE WELL NAME NUMBER From: _____ To: _____ Effective Date: _____
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<input type="checkbox"/> ABANDONED LOCATION: Was location ever built? <input type="checkbox"/> Yes <input type="checkbox"/> No Is site ready for inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No Date Ready for Inspection: _____	<input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS Date well shut in or temporarily abandoned: _____ Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No MIT required if shut in longer than two years. Date of last MIT _____
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<input type="checkbox"/> SPUD DATE: _____	<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)
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☐ **SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK** *submit cbl and cement job summaries

Method used	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom	Date

☐ **RECLAMATION:** Attach technical page describing final reclamation procedures per Rule 1004.
Final reclamation will commence on approximately _____ ☐ Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

<input checked="" type="checkbox"/> Notice of Intent Approximate Start Date: 10/1/11	<input type="checkbox"/> Report of Work Done Date Work Completed: _____
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Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input type="checkbox"/> Request to Vent or Flare	<input type="checkbox"/> E&P Waste Disposal
<input checked="" type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested	<input type="checkbox"/> Status Update/Change of Remediation Plans
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: Lengthen Surface Casing Depth	for Spills and Releases

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

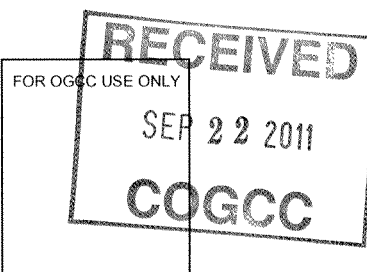
Signed: Howard Harris Date: 9/20/11 Email: Howard.Harris@Williams.com

Print Name: Howard Harris Title: Sr. Regulatory Specialist

COGCC Approved: [Signature] Title: NWA Engineer Date: 11/14/11

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



1. OGCC Operator Number: 96850 API Number: 05-045-19708-00
2. Name of Operator: Williams Production RMT Company LLC OGCC Facility ID #
3. Well/Facility Name: Federal Well/Facility Number: SP 432-14
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): SWNE Sec 14 T7S-R95W

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

DESCRIBE PROPOSED OR COMPLETED OPERATIONS

Williams proposes to increase the surface casing set depth from 915' TMD to 2400' TMD for the subject well. Total depth will remain the same. See attached directional plan for details.

none ("14/11") in wellfile,
recent

(there are 2 "original" (2010) dir drill plans). JSL