



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

SUNDRY NOTICE

RECEIVED OCT 26 2011 COGCC/Rifle Office

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.)

1. OGCC Operator Number: 96850 4. Contact Name: Angela Neifert-Kraiser
2. Name of Operator: Williams Production RMT Co. LLC
3. Address: 1001 17th Street, Suite 1200 City: Denver State: CO Zip: 80202
5. API Number: 05-045-17866-00 OGCC Facility ID Number:
6. Well/Facility Name: Jolley 7. Well/Facility Number: KP 332-17
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): SWNE 17-T6S-91W
9. County: Garfield 10. Field Name: Kokopeli
11. Federal, Indian or State Lease Number:

Complete the Attachment Checklist

OF OGCC

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:
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:
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: 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

CHANGE OF OPERATOR (prior to drilling): Effective Date: Plugging Bond: Blanket Individual
CHANGE WELL NAME: NUMBER From: To: Effective Date:

ABANDONED LOCATION: Was location ever built? Yes No Is site ready for inspection? Yes No Date Ready for inspection:
NOTICE OF CONTINUED SHUT IN STATUS: Date well shut in or temporarily abandoned: Has Production Equipment been removed from site? Yes No MIT required if shut in longer than two years. Date of last MIT

SPUD DATE: REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)

SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK: Method used: Cementing tool setting/perf depth: Cement volume: Cement top: Cement bottom: Date: *submit cbl and cement job summaries

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

Notice of Intent: Approximate Start Date: 10/21/11 Report of Work Done: Date Work Completed:

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

Intent to Recomplete (submit form 2) Request to Vent or Flare E&P Waste Disposal
Change Drilling Plans Repair Well Beneficial Reuse of E&P Waste
Gross Interval Changed? Rule 502 variance requested Status Update/Change of Remediation Plans
Casing/Cementing Program Change Other: Vent Bradenhead Gas 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: Angela J Neifert-Kraiser Date: 10/26/11 Email: Angela.Neifert-Kraiser@Williams.com
Print Name: Angela J Neifert-Kraiser Title: Regulatory Specialist

COGCC Approved: Kim J. Kij Title: EIT III Date: 11/8/11

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

RECEIVED

OCT 26 2011

OGCC/Rifle Office

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|--|--|
| 1. OGCC Operator Number: <u>96850</u> | API Number: <u>05-045-17866-00</u> |
| 2. Name of Operator: <u>Williams Production RMT Co LLC</u> | OGCC Facility ID # _____ |
| 3. Well/Facility Name: <u>Jolley</u> | Well/Facility Number: <u>KP 332-17</u> |
| 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): _____ | <u>SWNE 17-T6S-91W</u> |

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.

5. **DESCRIBE PROPOSED OR COMPLETED OPERATIONS**

Well Information:

Surface Csg 814 ft
TD 6960 ft
Prod Csg 6949 ft
Prod TOC at 570 ft (Baker Temp Log 10/17/2011)
PBTD 6922 ft
Perfs – None
Tubing landing depth – None

History:

Plug was bumped 10/17/2011. All initial bradenhead measurements were 0 psi. **KP 332-17 bradenhead started** to build the evening of 10/20/2011. It hit 150 psi on the early morning of 10/21/2011. When bled off it was all gas, no fluid. It built back up to 150 psi in 3 hours time. When bled off again it was all gas. When open and dead no gas or fluid escapes. Due to the high apparent TOC based off the Temp Log Williams would like to vent to a tank for 90 days. **We believe it will dissipate over time.**