



State of Colorado Oil and Gas Conservation Commission

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



FOR OGCC USE ONLY

ACCIDENT REPORT

As required by Rule 602.b.

Report taken by:

DESCRIPTION OF ACCIDENT (Please be as specific as possible)

Name of Operator: <u>Williams Production RMT Company</u>	Location	
Date of Incident: <u>November 13, 2011</u>	County: <u>Garfield</u>	
Type of Facility (well, tank battery, flow line, pit): <u>Well</u>	Field Name: <u>Parachute</u>	
Well Name and Number: <u>Federal PA 541-29</u>	QtrQtr: <u>NW NW</u>	Section: <u>28</u>
API Number: <u>05 045 20426 00</u>	Township: <u>6 South</u>	Range: <u>95 West</u>
Connect to Accident (land owner, royalty owner, etc.): <u>Operator</u>	Meridian: <u>6th PM</u>	

Provide a detailed description of the accident, problem, and cause (equipment failure, human error, etc.):

When hoisting a lifting sub up to the rig floor with the winchline, the sub swung toward the control panel on the ST-80 and a drilling contractor grabbed the sub to try and control it. In doing so his left index finger was pinched between the ST-80 and the sub. The tip of the contractor's finger was nearly amputated from the impact. A physician tried to re-attach the finger tip the following day but the attempt failed and the tip had to be removed the following week. The incident occurred on November 13, 2011 at 11:00 AM. Shaun Kellerby with the COGCC was notified of the incident by e-mail on November 14, 2011 at 9:26 AM.

OTHER NOTIFICATIONS

List the parties and agencies notified (County, BLM, EPA, DOT, Local Emergency Planning Coordinator or other).

Date	Agency	Contact Person	Response

Accident Tracking No: _____