

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources
Department
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-144
July 21, 2008

For temporary pits, closed-loop systems, and below-grade tanks, submit to the appropriate NMOCD District Office
For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.

7365
**Pit, Closed-Loop System, Below-Grade Tank, or
Proposed Alternative Method Permit or Closure Plan Application**

Type of action: ☐ Permit of a pit, closed-loop system, below-grade tank, or proposed alternative method
☒ Closure of a pit, closed-loop system, below-grade tank, or proposed alternative method
☐ Modification to an existing permit
☐ Closure plan only submitted for an existing permitted or non-permitted pit, closed-loop system, below-grade tank, or proposed alternative method

Instructions: Please submit one application (Form C-144) per individual pit, closed-loop system, below-grade tank or alternative request

Please be advised that approval of this request does not relieve the operator of liability should operations result in pollution of surface water, ground water or the environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances.

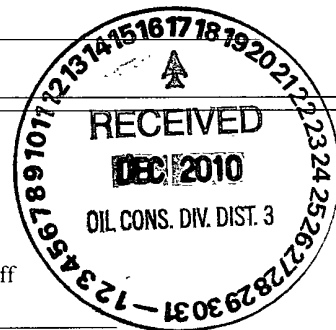
1.
Operator: Williams Operating Co, LLC OGRID #: 120782
Address: PO Box 640 / 721 S Main Aztec, NM 87410
Facility or well name: Cox Canyon #7B
API Number: 3004533022 OCD Permit Number: _____
U/L or Qtr/Qtr C Section 17 Township 32N Range 11W County: San Juan
Center of Proposed Design: Latitude 36.989125 Longitude -108.015237 NAD: ☐ 1927 ☒ 1983
Surface Owner: ☒ Federal ☐ State ☐ Private ☐ Tribal Trust or Indian Allotment

2.
☒ **Pit:** Subsection F or G of 19.15.17.11 NMAC
Temporary: ☒ Drilling ☐ Workover
☐ Permanent ☐ Emergency ☐ Cavitation ☐ P&A
☒ Lined ☐ Unlined Liner type: Thickness 20 mil ☒ LLDPE ☐ HDPE ☐ PVC ☐ Other _____
☐ String-Reinforced
Liner Seams: ☐ Welded ☒ Factory ☐ Other _____ Volume: 20,000 bbl Dimensions: L 140' x W 70' x D 12'

3.
☐ **Closed-loop System:** Subsection H of 19.15.17.11 NMAC
Type of Operation: ☐ P&A ☐ Drilling a new well ☐ Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent)
☐ Drying Pad ☐ Above Ground Steel Tanks ☐ Haul-off Bins ☐ Other _____
☐ Lined ☐ Unlined Liner type: Thickness _____ mil ☐ LLDPE ☐ HDPE ☐ PVC ☐ Other _____
Liner Seams: ☐ Welded ☐ Factory ☐ Other _____

4.
☐ **Below-grade tank:** Subsection I of 19.15.17.11 NMAC
Volume: _____ bbl Type of fluid: _____
Tank Construction material: _____
☐ Secondary containment with leak detection ☐ Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off
☐ Visible sidewalls and liner ☐ Visible sidewalls only ☐ Other _____
Liner type: Thickness _____ mil ☐ HDPE ☐ PVC ☐ Other _____

5.
☐ **Alternative Method:**
Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.



6.

Fencing: Subsection D of 19.15.17.11 NMAC (*Applies to permanent pits, temporary pits, and below-grade tanks*)

- ☐ Chain link, six feet in height, two strands of barbed wire at top (*Required if located within 1000 feet of a permanent residence, school, hospital, institution or church*)
- ☐ Four foot height, four strands of barbed wire evenly spaced between one and four feet
- ☒ Alternate. Please specify _____ BLM Stipulation _____

7.

Netting: Subsection E of 19.15.17.11 NMAC (*Applies to permanent pits and permanent open top tanks*)

- ☐ Screen ☐ Netting ☐ Other _____
- ☐ Monthly inspections (If netting or screening is not physically feasible)

8.

Signs: Subsection C of 19.15.17.11 NMAC

- ☐ 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers
- ☒ Signed in compliance with 19.15.3.103 NMAC

9.

Administrative Approvals and Exceptions:

Justifications and/or demonstrations of equivalency are required. Please refer to 19.15 17 NMAC for guidance.

Please check a box if one or more of the following is requested, if not leave blank:

- ☒ Administrative approval(s): Requests must be submitted to the appropriate division district or the Santa Fe Environmental Bureau office for consideration of approval.
- ☐ Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.

10.

Siting Criteria (regarding permitting): 19.15.17.10 NMAC

Instructions: The applicant must demonstrate compliance for each siting criteria below in the application. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to drying pads or above-grade tanks associated with a closed-loop system.

Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank. - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark). - Topographic map; Visual inspection (certification) of the proposed site	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applies to temporary, emergency, or cavitation pits and below-grade tanks) - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applies to permanent pits) - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application. - NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended. - Written confirmation or verification from the municipality; Written approval obtained from the municipality	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Within 500 feet of a wetland. - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Within the area overlying a subsurface mine. - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Within an unstable area. - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Within a 100-year floodplain. - FEMA map	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

11.

Temporary Pits, Emergency Pits, and Below-grade Tanks Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC**Instructions:** Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.

- ☒ Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC
- ☒ Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.9 NMAC
- ☒ Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC
- ☒ Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☒ Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC
- ☒ Closure Plan (Please complete Boxes 14 through 18, if applicable) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC

☐ Previously Approved Design (attach copy of design) API Number: _____ or Permit Number: _____

12.

Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC**Instructions:** Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.

- ☐ Geologic and Hydrogeologic Data (only for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of 19.15.17.9
- ☐ Siting Criteria Compliance Demonstrations (only for on-site closure) - based upon the appropriate requirements of 19.15.17.10 NMAC
- ☐ Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC
- ☐ Closure Plan (Please complete Boxes 14 through 18, if applicable) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC

☐ Previously Approved Design (attach copy of design) API Number: _____

☐ Previously Approved Operating and Maintenance Plan API Number: _____ (Applies only to closed-loop system that use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

13.

Permanent Pits Permit Application Checklist: Subsection B of 19.15.17.9 NMAC**Instructions:** Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.

- ☐ Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19.15.17.9 NMAC
- ☐ Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC
- ☐ Climatological Factors Assessment
- ☐ Certified Engineering Design Plans - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Dike Protection and Structural Integrity Design - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Leak Detection Design - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Liner Specifications and Compatibility Assessment - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Quality Control/Quality Assurance Construction and Installation Plan
- ☐ Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC
- ☐ Freeboard and Overtopping Prevention Plan - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Nuisance or Hazardous Odors, including H₂S, Prevention Plan
- ☐ Emergency Response Plan
- ☐ Oil Field Waste Stream Characterization
- ☐ Monitoring and Inspection Plan
- ☐ Erosion Control Plan
- ☐ Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC

14.

Proposed Closure: 19.15.17.13 NMAC**Instructions:** Please complete the applicable boxes, Boxes 14 through 18, in regards to the proposed closure plan.

Type: ☒ Drilling ☒ Workover ☐ Emergency ☐ Cavitation ☐ P&A ☐ Permanent Pit ☐ Below-grade Tank ☐ Closed-loop System

☐ Alternative

Proposed Closure Method: ☐ Waste Excavation and Removal

☐ Waste Removal (Closed-loop systems only)

☒ On-site Closure Method (Only for temporary pits and closed-loop systems)

☒ In-place Burial ☐ On-site Trench Burial

☐ Alternative Closure Method (Exceptions must be submitted to the Santa Fe Environmental Bureau for consideration)

15.

Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) **Instructions:** Each of the following items must be attached to the closure plan. Please indicate, by a check mark in the box, that the documents are attached.

- ☐ Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC
- ☐ Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC
- ☐ Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings)
- ☐ Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC
- ☐ Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC
- ☐ Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

16.

Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC)

Instructions: Please indentify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than two facilities are required.

Disposal Facility Name: _____ Disposal Facility Permit Number: _____

Disposal Facility Name: _____ Disposal Facility Permit Number: _____

Will any of the proposed closed-loop system operations and associated activities occur on or in areas that *will not* be used for future service and operations?

☐ Yes (If yes, please provide the information below) ☐ No

Required for impacted areas which will not be used for future service and operations:

☐ Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC

☐ Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC

☐ Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

17.

Siting Criteria (regarding on-site closure methods only): 19.15.17.10 NMAC

Instructions: Each siting criteria requires a demonstration of compliance in the closure plan. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17.10 NMAC for guidance.

Ground water is less than 50 feet below the bottom of the buried waste.

- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells

☐ Yes ☒ No

☐ NA

Ground water is between 50 and 100 feet below the bottom of the buried waste

- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells

☒ Yes ☐ No

☐ NA

Ground water is more than 100 feet below the bottom of the buried waste.

- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells

☐ Yes ☒ No

☐ NA

Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).

- Topographic map; Visual inspection (certification) of the proposed site

☐ Yes ☒ No

Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.

- Visual inspection (certification) of the proposed site; Aerial photo; Satellite image

☐ Yes ☒ No

Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application.

- NM Office of the State Engineer - iWATERS database; Visual inspection (certification) of the proposed site

☐ Yes ☒ No

Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended.

- Written confirmation or verification from the municipality; Written approval obtained from the municipality

☐ Yes ☒ No

Within 500 feet of a wetland.

- US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site

☐ Yes ☒ No

Within the area overlying a subsurface mine.

- Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division

☐ Yes ☒ No

Within an unstable area.

- Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map

☐ Yes ☒ No

Within a 100-year floodplain.

- FEMA map

☐ Yes ☒ No

18.

On-Site Closure Plan Checklist: (19.15.17.13 NMAC) **Instructions:** Each of the following items must be attached to the closure plan. Please indicate, by a check mark in the box, that the documents are attached.

☒ Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC

☒ Proof of Surface Owner Notice - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC

☐ Construction/Design Plan of Burial Trench (if applicable) based upon the appropriate requirements of 19.15.17.11 NMAC

☒ Construction/Design Plan of Temporary Pit (for in-place burial of a drying pad) - based upon the appropriate requirements of 19.15.17.11 NMAC

☒ Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC

☒ Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC

☒ Waste Material Sampling Plan - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC

☒ Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings or in case on-site closure standards cannot be achieved)

☒ Soil Cover Design - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC

☒ Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC

☒ Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

19.

Operator Application Certification:

I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.

Name (Print): _____ Title: _____

Signature: _____ Date: _____

e-mail address: _____ Telephone: _____

20.

OCD Approval: ☐ Permit Application (including closure plan) ☒ Closure Plan (only) ☐ OCD Conditions (see attachment)

OCD Representative Signature: Jonathan D. Kelly Approval Date: 9/02/2011

Title: Compliance Officer OCD Permit Number: _____

21.

Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC

Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not complete this section of the form until an approved closure plan has been obtained and the closure activities have been completed.

☒ Closure Completion Date: 9/27/2010

22.

Closure Method:

☐ Waste Excavation and Removal ☒ On-Site Closure Method ☐ Alternative Closure Method ☐ Waste Removal (Closed-loop systems only)
☐ If different from approved plan, please explain.

23.

Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:

Instructions: Please identify the facility or facilities for where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more than two facilities were utilized.

Disposal Facility Name: _____ Disposal Facility Permit Number: _____

Disposal Facility Name: _____ Disposal Facility Permit Number: _____

Were the closed-loop system operations and associated activities performed on or in areas that *will not* be used for future service and operations?

☐ Yes (If yes, please demonstrate compliance to the items below) ☐ No

Required for impacted areas which will not be used for future service and operations:

- ☐ Site Reclamation (Photo Documentation)
☐ Soil Backfilling and Cover Installation
☐ Re-vegetation Application Rates and Seeding Technique

24.

Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached.

- ☒ Proof of Closure Notice (surface owner and division)
☐ Proof of Deed Notice (required for on-site closure)
☒ Plot Plan (for on-site closures and temporary pits)
☒ Confirmation Sampling Analytical Results (if applicable)
☐ Waste Material Sampling Analytical Results (required for on-site closure)
☐ Disposal Facility Name and Permit Number
☒ Soil Backfilling and Cover Installation
☒ Re-vegetation Application Rates and Seeding Technique
☒ Site Reclamation (Photo Documentation)

On-site Closure Location: Latitude 36.989125 Longitude -108.015237 NAD: ☐ 1927 ☒ 1983

25.

Operator Closure Certification:

I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.

Name (Print): Vanessa Fields Title: EH&S Coordinator

Signature: [Signature] Date: 12-17-10

e-mail address: vanessa.fields@williams.com Telephone: 505-634-4209

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
PO Drawer 00, Artesia, NM 88211-0719

District III
1000 Rio Brazos Rd., Aztec, NM 87410

District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 72319 / 71599	*Pool Name BLANCO MESAVERDE / BASIN DAKOTA
*Property Code	*Property Name COX CANYON UNIT		*Well Number 7B
*OGRID No. 120782	*Operator Name WILLIAMS PRODUCTION COMPANY		*Elevation 6659'

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	17	32N	11W		1140	NORTH	1560	WEST	SAN JUAN

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	17	32N	11W		660	NORTH	1950	WEST	SAN JUAN

¹² Dedicated Acres 320.0 Acres - (E/2 W/2 & W/2 E/2)	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

		<p>¹⁷ OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p>Signature _____</p> <p>Printed Name _____</p> <p>Title _____</p> <p>Date _____</p> <p>¹⁸ SURVEYOR CERTIFICATION</p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>Date Revised: DECEMBER 11, 2005 Survey Date: DECEMBER 20, 2004</p> <p>Signature and Seal of Professional Surveyor</p> <p></p> <p>JASON C. EDWARDS Certificate Number 15269</p>
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Williams Production Co., LLC
San Juan Basin: New Mexico Assets
Temporary Pit In-place (50-100 ft to Groundwater) Closure Report
Drilling/Completion and Workover

Well: Cox Canyon #007B
API No: 30-04533022
Location: CS17-T32N-R11W, NMPM

In accordance with Rule 19.15.17.13 NMAC, the following plan describes the general in-place closure requirements of temporary pits on Williams Production Co, LLC (WPX) locations in the San Juan Basin of New Mexico. This is WPX's standard procedure for all temporary pits to be utilized for the drilling, completion and/or workovers of oil and gas wells operated by WPX. For those temporary pits which do not conform to this standard closure plan, a separate well/pit specific closure plan will be developed and utilized.

All closure activities will include proper documentation and will be submitted to OCD within 60 days of the pit closure on a Closure Report using Division Form C-144. The Report will include the following:

- Details on Capping and Covering, where applicable
- Plot Plan (Pit Diagram)
- Inspection reports
- Sampling Results
- Division Form C-105: *WELL COMPLETION OR RECOMPLETION REPORT AND LOG*
- Copy of Deed Notice filed with the County Clerk (format to meet County requirements)
A deed notice is not required on state, federal or tribal land according to NMOCD FAQ dated October 30, 2008 and posted on the NMOCD website.

General Plan Requirements:

1. All free standing liquids will be removed from the pit at the start of the closure process. Liquids will be removed in a manner that the appropriate District Office approves including; recycled, reused, reclaimed, evaporated, and/or disposed of in a Division-approved facility. Once all free liquids are removed, the sludge will be stabilized by one of the following methods depending on equipment availability: blending with clean stockpiled soils or dewatering using a Bowl Decanter Centrifuge then blending with clean stockpiled soils.

A Bowl Decanter Centrifugal was used to aid in the liquid removal. To the extent practical, free liquids were pulled from the reserve pit following the completion rigoff. Haul dates was 1/29/2010 to

2. The preferred method of closure for all temporary pits will be on-site closure by in-place burial, provided all the criteria in 19.15.17.13.B are met.

On-site burial plan for this location was approved by the Aztec District Office on (4/9/2010)

3. The surface owner shall be notified of WPX's proposed closure plan using a means that provides proof of notice (i.e. certified mail/return receipt requested)

Williams notified the SMA of its intent to use a temporary pit and onsite burial in the Surface Use Plan in the well APD. The SMA was notified by email see attached. No return receipt required per BLM:FFO/NMOCD MOU dated 5/4/09.

4. Within six months of the "rig-off" status occurring WPX will ensure that the temporary pit is covered, re-contoured and reseeding in progress.

Drill rig-off (1/14/2010) Request for transfer to completion rig submitted (6/7/2010) to OCD Aztec District Office and approved Completion rig-off 9/20/10 Pit covered (9/28/2010) Pit area along with unused portions of well pad to be interim reclaimed in accordance with Surface Management Agency requirements in APD-COAs and per BLM:FFO/NMOCD MOU dated 5/4/09.

5. Notice of Closure will be given to the Aztec District office between 72 hours and one week of the scheduled closure via email or phone. The notification of closure will include the following:

- a. Operators Name (WPX)
- b. Well Name and API Number
- c. Location (USTR)

The Aztec District Office of NMOCD was notified by email using a format acceptable to the District. Copies of the notification from Abode Contractors on (9/23/10) is attached.

6. The pit liner shall be removed above "mud level" after stabilization. Removal of the liner will consist of manually or mechanically cutting the liner at the mud level and removing all remaining liner. Care will be taken to remove "all" of the liner (i.e. anchored material). All excessive liner will be disposed of at a

licensed disposal facility (probably San Juan Regional Landfill operated by Waste Management under NMED Permit SWM-052426).

The liner to the temporary pit was removed above the "mud level" once stabilized. Removal of the liner consisted of manually cutting the liner and removing all remaining liner material above the "mud level" including the anchor material. All excessive liner was disposed of at the San Juan Regional Landfill operated by Waste Management under NMED Permit SWM-052426.

7. The shallow surface soils of the unlined flare/cavitation pit will be scrapped and placed in the lined pit. A five-point composite sample will be taken of the pit using sampling tools and all samples tested per 19.15.17.13(B)(1)(b) NMAC. In the event that the criteria are not met (See Table 1), a release will be reported to NMOCD in compliance with Rule 116 and additional soil removal will be done until closure criteria are met.

A five-point composite sampling was taken of the flare pit area using sampling tools and the sample was tested per 19.15.17.13(B)(1)(b) NMAC. Results are shown in Table 1 and lab reports are attached.

8. Solidification of the remaining pit contents shall be achieved by mixing non-waste containing, earthen material. The solidification process will be accomplished use a combination of natural drying and mechanical mixing. Pit contents will be mixed with non-waste, earthen material to a consistency that is deemed safe and stable. The mixing ratio shall not exceed 3 parts non-waste to 1 part pit contents.

Following removal of free liquids, the pit contents were mixed with non-waste containing, earthen material in order to achieve appropriate solidification and a consistency that was deemed safe and stable. The solidification process was accomplished using a combination of natural drying, a Bowl Decanter Centrifuge, and mechanically mixing using a dozer and trackhoe. The mixing ration was approximately 2.5-3 parts native soil to 1 part pit contents. Solidification was completed (9/20/10).

9. A five-point composite sample will be taken of the pit using sampling tools and all samples tested per 19.15.17.13(B)(1)(b) NMAC. In the event that the criteria are not met (See Table 1), all contents will be handled per 19.15.17.13(B)(1)(a) (i.e. dig and haul to a Division-approved facility). Approval to haul will be requested of the Aztec District office prior to initiation.

A five-point composite sampling was taken of the pit area using sampling tools and the sample was tested per 19.15.17.13(B)(1)(b) NMAC. Results are shown in Table 1 and lab reports are attached.

Table 1: Closure Criteria for Temporary Pits in Non-sensitive Areas with Groundwater Between 50-100 bgs.

Components	Testing Methods	Limits (mg/Kg)	Flare (mg/Kg)	Pit (mg/Kg)
Benzene	EPA SW-846 Method 8021B or 8260B	0.2	ND	ND
BTEX	EPA SW-846 Method 8021B or 8260B	50	ND	ND
TPH	EPA SW-846 Method 418.1	2500	25.8	6.6
GRO/DRO	EPA SW-846 Method 8015M (GRO/DRO)	500	ND	ND

10. Upon completion of solidification and testing, the pit area will be backfilled with non-waste earthen material compacted to native conditions to enable effective re-vegetation for successful evapotranspiration. A minimum of four feet of cover including replacement of one foot of suitable material to establish vegetation, or the background thickness of topsoil, whichever is greater.

Upon completion of solidification and testing, the pit area was backfilled with non-waste earthen material compacted to native conditions. A minimum of four feet of cover to the extent practical was achieved and the cover included just over a foot of topsoil suitable to establish vegetation.

11. Following cover, the site will be re-contoured to meet the Surface Management Agency or surface owner requirements. Re-contouring will attempt to match fit, shape, line form, and texture of the surrounding geography. Re-shaping will include drainage control, prevent ponding, and minimize erosion. Natural drainages will be unimpeded and stormwater Best Management Practices (BMPs) will be used to aid in soil stabilization and protection surface water quality.

Following cover, Williams reestablished drainage and contours to approximately match previous topography meeting the Conditions of Approval in the APD and the direction offered by a BLM/USFS inspector. Cover and re-contouring were completed (9/29/10).

12. Notification will be sent to the Aztec District office when the reclaimed area is seeded. Williams will comply with Surface Management Agency reseeding requirements in the COAs of the APD for the referenced well, per BLM:FFO/NMOCD MOU dated 5/4/09.

13. WPX shall seed the disturbed areas the first growing season after the pit is covered. Seeding will be accomplished via drilling on the contour whenever practical, or by other Division-approved methods. Vegetative cover will equal 70% of the native perennial vegetative cover (un-impacted) consisting of at least three native plant species, including at least one grass, but not including noxious weeds, and maintained that cover through two successive growing seasons. Repeat seeding or planting will be continued until successful vegetative growth occurs. Note: WPX assumes the seeding stipulations including mix and seeding methods specified by the Surface Management Agency (BLM, BOR, USFS,

Tribal, etc.) or Land owner as part of a surface use agreement or APD are Division-approved methods unless notified by the Division of their unacceptability.

Williams will comply with Surface Management Agency reseeding requirements in the COAs of the APD for the referenced well, per BLM:FFO/NMOCD MOU dated 5/4/09.

14. The temporary pit will be located with a steel marker, no less than four inches in diameter, cemented in a hole three feet deep in the center of the on site burial upon the abandonment of all wells on the pad. The marker will be flush with the ground to allow access of the active well pad and for safety concerns. The marker will include a threaded collar to be used for future abandonment. The top of the marker will contain a welded steel 12" square plate that indicates the on site burial of the temporary pit. The plate will be easily removable and a four-foot tall riser will be threaded into the top of the collar marker and welded around the base with the operations information at the time of all wells on the pad abandoned. The information will include Operator Name, Lease Name, Well Name, and number, USTR, and an indicator that the marker is an onsite pit burial location.

The temporary pit was located with a steel marker meeting the above listed specifications. The marker has the following information welded for future reference: Williams Production, NMSF-078768, S17-T32N-R11W-E, "Pit Burial" (photo attached). Steel marker set (10/13/10).



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**EPA METHOD 8015 Modified
Nonhalogenated Volatile Organics
Total Petroleum Hydrocarbons**

Client:	WPX	Project #:	04108-0136
Sample ID:	Reserve Pit	Date Reported:	10-25-10
Laboratory Number:	56273	Date Sampled:	10-19-10
Chain of Custody No:	10575	Date Received:	10-21-10
Sample Matrix:	Soil	Date Extracted:	10-22-10
Preservative:	Cool	Date Analyzed:	10-25-10
Condition:	Intact	Analysis Requested:	8015 TPH

Parameter	Concentration (mg/Kg)	Det. Limit (mg/Kg)
Gasoline Range (C5 - C10)	ND	0.2
Diesel Range (C10 - C28)	ND	0.1
Total Petroleum Hydrocarbons	ND	

ND - Parameter not detected at the stated detection limit.

References: Method 8015B, Nonhalogenated Volatile Organics, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.

Comments: **Cox Canyon #7B**

Analyst

Review

EPA Method 8015 Modified
Nonhalogenated Volatile Organics
Total Petroleum Hydrocarbons

Quality Assurance Report

Client:	QA/QC	Project #:	N/A
Sample ID:	10-25-10 QA/QC	Date Reported:	10-25-10
Laboratory Number:	56273	Date Sampled:	N/A
Sample Matrix:	Methylene Chloride	Date Received:	N/A
Preservative:	N/A	Date Analyzed:	10-25-10
Condition:	N/A	Analysis Requested:	TPH

	Cal Date	Cal RF	C-Cal RF	% Difference	Accept Range
Gasoline Range C5 - C10	10-25-10	9.9960E+002	1.0000E+003	0.04%	0 - 15%
Diesel Range C10 - C28	10-25-10	9.9960E+002	1.0000E+003	0.04%	0 - 15%

Blank Conc. (mg/L - mg/Kg)	Concentration	Detection Limit
Gasoline Range C5 - C10	ND	0.2
Diesel Range C10 - C28	ND	0.1

Duplicate Conc. (mg/Kg)	Sample	Duplicate	% Difference	Accept Range
Gasoline Range C5 - C10	ND	ND	0.0%	0 - 30%
Diesel Range C10 - C28	ND	ND	0.0%	0 - 30%

Spike Conc. (mg/Kg)	Sample	Spike Added	Spike Result	% Recovery	Accept Range
Gasoline Range C5 - C10	ND	250	253	101%	75 - 125%
Diesel Range C10 - C28	ND	250	253	101%	75 - 125%

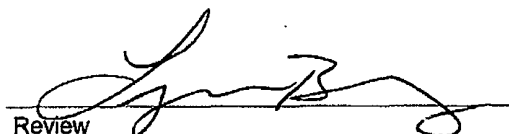
ND - Parameter not detected at the stated detection limit.

References: Method 8015B, Nonhalogenated Volatile Organics, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.

Comments: QA/QC for Samples 56273, 56276, 56281-56283



Analyst



Review

Client:	WPX	Project #:	04108-0136
Sample ID:	Reserve Pit	Date Reported:	10-25-10
Laboratory Number:	56273	Date Sampled:	10-19-10
Chain of Custody:	10575	Date Received:	10-21-10
Sample Matrix:	Soil	Date Analyzed:	10-25-10
Preservative:	Cool	Date Extracted:	10-22-10
Condition:	Intact	Analysis Requested:	BTEX
		Dilution:	10

Parameter	Concentration (ug/Kg)	Det. Limit (ug/Kg)
Benzene	ND	0.9
Toluene	ND	1.0
Ethylbenzene	ND	1.0
p,m-Xylene	ND	1.2
o-Xylene	ND	0.9
Total BTEX	ND	


ND - Parameter not detected at the stated detection limit.

Surrogate Recoveries:	Parameter	Percent Recovery
	Fluorobenzene	102 %
	1,4-difluorobenzene	102 %
	Bromochlorobenzene	94.6 %

References: Method 5030B, Purge-and-Trap, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.

Method 8021B, Aromatic Volatile Organics, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.

Comments: Cox Canyon #7B



 Analyst



 Review

Client:	N/A	Project #:	N/A
Sample ID:	1025BBLK QA/QC	Date Reported:	10-25-10
Laboratory Number:	56276	Date Sampled:	N/A
Sample Matrix:	Soil	Date Received:	N/A
Preservative:	N/A	Date Analyzed:	10-25-10
Condition:	N/A	Analysis:	BTEX
		Dilution:	10

Calibration and Detection Limits (ug/L)	Cal RF	Cal RF	%Diff	Blank Conc	Detect Limit
		Accept Range	0 - 15%		
Benzene	4.8185E+005	4.8281E+005	0.2%	ND	0.1
Toluene	5.4660E+005	5.4769E+005	0.2%	ND	0.1
Ethylbenzene	5.0419E+005	5.0520E+005	0.2%	ND	0.1
p,m-Xylene	1.2402E+006	1.2427E+006	0.2%	ND	0.1
o-Xylene	4.5138E+005	4.5229E+005	0.2%	ND	0.1

Duplicate Conc (ug/Kg)	Sample	Duplicate	%Diff	Accept Range	Detect Limit
Benzene	ND	ND	0.0%	0 - 30%	0.9
Toluene	ND	ND	0.0%	0 - 30%	1.0
Ethylbenzene	ND	ND	0.0%	0 - 30%	1.0
p,m-Xylene	ND	ND	0.0%	0 - 30%	1.2
o-Xylene	ND	ND	0.0%	0 - 30%	0.9

Spike Conc. (ug/Kg)	Sample	Amount Spiked	Spiked Sample	% Recovery	Accept Range
Benzene	ND	500	510	102%	39 - 150
Toluene	ND	500	511	102%	46 - 148
Ethylbenzene	ND	500	511	102%	32 - 160
p,m-Xylene	ND	1000	1,040	104%	46 - 148
o-Xylene	ND	500	515	103%	46 - 148

ND - Parameter not detected at the stated detection limit.

Dilution: Spike and spiked sample concentration represent a dilution proportional to sample dilution.

References: Method 5030B, Purge-and-Trap, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.
 Method 8021B, Aromatic and Halogenated Volatiles by Gas Chromatography Using Photoionization and/or Electrolytic Conductivity Detectors, SW-846, USEPA December 1996.

Comments: QA/QC for Samples 56273, 56276, 56281-56283

Analyst

Review


Client:	WPX	Project #:	04108-0136
Sample ID:	Reserve Pit	Date Reported:	10-25-10
Laboratory Number:	56273	Date Sampled:	10-19-10
Chain of Custody No:	10575	Date Received:	10-21-10
Sample Matrix:	Soil	Date Extracted:	10-22-10
Preservative:	Cool	Date Analyzed:	10-22-10
Condition:	Intact	Analysis Needed:	TPH-418.1

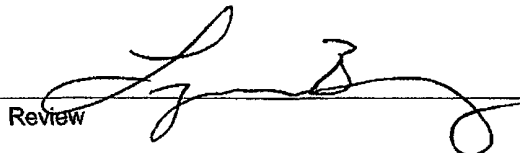
Parameter	Concentration (mg/kg)	Det. Limit (mg/kg)
Total Petroleum Hydrocarbons	6.6	5.3

ND = Parameter not detected at the stated detection limit.

References: Method 418.1, Petroleum Hydrocarbons, Total Recoverable, Chemical Analysis of Water and Waste, USEPA Storet No. 4551, 1978.

Comments: **Cox Canyon #7B**



Analyst

Review



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**EPA METHOD 418.1
TOTAL PETROLEUM
HYDROCARBONS
QUALITY ASSURANCE REPORT**

Client:	QA/QC	Project #:	N/A
Sample ID:	QA/QC	Date Reported:	10-22-10
Laboratory Number:	10-22-TPH.QA/QC 56267	Date Sampled:	N/A
Sample Matrix:	Freon-113	Date Analyzed:	10-22-10
Preservative:	N/A	Date Extracted:	10-22-10
Condition:	N/A	Analysis Needed:	TPH

Calibration	I-Cal Date	C-Cal Date	I-Cal RF	C-Cal RF	% Difference	Accept. Range
	10-05-10	10-22-10	1,640	1,640	0.0%	+/- 10%

Blank Conc. (mg/Kg)	Concentration	Detection Limit
TPH	ND	5.3

Duplicate Conc. (mg/Kg)	Sample	Duplicate	% Difference	Accept. Range
TPH	158	197	25.0%	+/- 30%

Spike Conc. (mg/Kg)	Sample	Spike Added	Spike Result	% Recovery	Accept Range
TPH	158	2,000	1,970	91.3%	80 - 120%

ND = Parameter not detected at the stated detection limit.

References: Method 418.1, Petroleum Hydrocarbons, Total Recoverable, Chemical Analysis of Water and Waste, USEPA Storet No. 4551, 1978.

Comments: QA/QC for Samples 56267, 56273 and 56281



Analyst




Review

Client:	WPX	Project #:	04108-0136
Sample ID:	Reserve Pit	Date Reported:	10-25-10
Lab ID#:	56273	Date Sampled:	10-19-10
Sample Matrix:	Soil	Date Received:	10-21-10
Preservative:	Cool	Date Analyzed:	10-25-10
Condition:	Intact	Chain of Custody:	10575

Parameter**Concentration (mg/Kg)****Total Chloride****10**

Reference: U.S.E.P.A., 4500B, "Methods for Chemical Analysis of Water and Wastes", 1983.
Standard Methods For The Examination of Water And Waste Water", 18th ed., 1992.

Comments: **Cox Canyon #7B**



Analyst

Review

CHAIN OF CUSTODY RECORD

10575

Client: WPX			Project Name / Location: COX CANYON # 7B			ANALYSIS / PARAMETERS														
Client Address: myke Lane			Sampler Name: JOHNNY STINSON			<div style="display: flex; justify-content: space-between;"> <div> TPH (Method 8015) BTEX (Method 8021) VOC (Method 8260) RCRA 8 Metals Cation / Anion RCI TCLP with H/P PAH TPH (418.1) CHLORIDE </div> <div> Sample Cool Sample Intact </div> </div>														
Client Phone No.:			Client No.: 04108-0136																	
Sample No./ Identification	Sample Date	Sample Time	Lab No.	Sample Matrix	No./Volume of Containers	Preservative H ₂ O ₂ HCl			TPH (Method 8015)	BTEX (Method 8021)	VOC (Method 8260)	RCRA 8 Metals	Cation / Anion	RCI	TCLP with H/P	PAH	TPH (418.1)	CHLORIDE	Sample Cool	Sample Intact
Reserve Pit	10-19-10	11:00AM	56273	Soil Solid Sludge Aqueous	1				✓	✓							✓	✓	Y	Y
				Soil Solid	Sludge Aqueous															
				Soil Solid	Sludge Aqueous															
				Soil Solid	Sludge Aqueous															
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				Soil Solid	Sludge Aqueous															
Relinquished by: (Signature) 				Date 10-21-10	Time 2:40 PM	Received by: (Signature) 				Date 10/21	Time 2:40									
Relinquished by: (Signature)						Received by: (Signature)														
Relinquished by: (Signature)						Received by: (Signature)														



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**EPA METHOD 8015 Modified
Nonhalogenated Volatile Organics
Total Petroleum Hydrocarbons**


Client:	WPX	Project #:	04108-0136
Sample ID:	Blow-Pit	Date Reported:	12-14-10
Laboratory Number:	56725	Date Sampled:	12-08-10
Chain of Custody No:	10877	Date Received:	12-10-10
Sample Matrix:	Soil	Date Extracted:	12-13-10
Preservative:	Cool	Date Analyzed:	12-13-10
Condition:	Intact	Analysis Requested:	8015 TPH

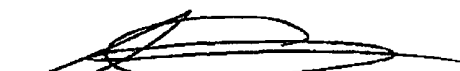
Parameter	Concentration (mg/Kg)	Det. Limit (mg/Kg)
Gasoline Range (C5 - C10)	ND	0.2
Diesel Range (C10 - C28)	ND	0.1
Total Petroleum Hydrocarbons	ND	

ND - Parameter not detected at the stated detection limit.

References: Method 8015B, Nonhalogenated Volatile Organics, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.

Comments: **Cox Canyon #7B**



Analyst

Review

**EPA Method 8015 Modified
 Nonhalogenated Volatile Organics
 Total Petroleum Hydrocarbons**

Quality Assurance Report

Client:	QA/QC	Project #:	N/A
Sample ID:	12-13-10 QA/QC	Date Reported:	12-14-10
Laboratory Number:	56710	Date Sampled:	N/A
Sample Matrix:	Methylene Chloride	Date Received:	N/A
Preservative:	N/A	Date Analyzed:	12-13-10
Condition:	N/A	Analysis Requested:	TPH

	I-Cal Date	I-Cal RF	C-Cal RF	% Difference	Accept. Range
Gasoline Range C5 - C10	12-13-10	9.9960E+002	1.0000E+003	0.04%	0 - 15%
Diesel Range C10 - C28	12-13-10	9.9960E+002	1.0000E+003	0.04%	0 - 15%

Blank Conc. (mg/L - mg/Kg)	Concentration	Detection Limit
Gasoline Range C5 - C10	ND	0.2
Diesel Range C10 - C28	ND	0.1


Duplicate Conc. (mg/Kg)	Sample	Duplicate	% Difference	Accept. Range
Gasoline Range C5 - C10	ND	ND	0.0%	0 - 30%
Diesel Range C10 - C28	ND	ND	0.0%	0 - 30%


Spike Conc. (mg/Kg)	Sample	Spike Added	Spike Result	% Recovery	Accept. Range
Gasoline Range C5 - C10	ND	250	266	106%	75 - 125%
Diesel Range C10 - C28	ND	250	237	94.9%	75 - 125%

ND - Parameter not detected at the stated detection limit.

References: Method 8015B, Nonhalogenated Volatile Organics, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.

Comments: QA/QC for Samples 56708, 56710-56716, 56725


 Analyst


 Review

Client:	WPX	Project #:	04108-0136
Sample ID:	Blow-Pit	Date Reported:	12-14-10
Laboratory Number:	56725	Date Sampled:	12-08-10
Chain of Custody:	10877	Date Received:	12-10-10
Sample Matrix:	Soil	Date Analyzed:	12-13-10
Preservative:	Cool	Date Extracted:	12-13-10
Condition:	Intact	Analysis Requested:	BTEX
		Dilution:	10

Parameter	Concentration (ug/Kg)	Det. Limit (ug/Kg)
Benzene	ND	0.9
Toluene	ND	1.0
Ethylbenzene	ND	1.0
p,m-Xylene	ND	1.2
o-Xylene	ND	0.9
Total BTEX	ND	


ND - Parameter not detected at the stated detection limit.

Surrogate Recoveries:	Parameter	Percent Recovery
	Fluorobenzene	117 %
	1,4-difluorobenzene	115 %
	Bromochlorobenzene	114 %

References: Method 5030B, Purge-and-Trap, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.

Method 8021B, Aromatic Volatile Organics, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.

Comments: Cox Canyon #7B



 Analyst



 Review

Client:	N/A	Project #:	N/A
Sample ID:	1213BBLK QA/QC	Date Reported:	12-14-10
Laboratory Number:	56708	Date Sampled:	N/A
Sample Matrix:	Soil	Date Received:	N/A
Preservative:	N/A	Date Analyzed:	12-13-10
Condition:	N/A	Analysis:	BTEX
		Dilution:	10

Calibration and Detection Limits (ug/L)	I-Cal RF	C-Cal RF	%Diff	Blank Conc	Detect Limit
		Accept. Range 0 - 15%			
Benzene	4.7432E+005	4.7527E+005	0.2%	ND	0.1
Toluene	5.1652E+005	5.1755E+005	0.2%	ND	0.1
Ethylbenzene	4.6152E+005	4.6245E+005	0.2%	ND	0.1
p,m-Xylene	1.0964E+006	1.0986E+006	0.2%	ND	0.1
o-Xylene	4.1862E+005	4.1946E+005	0.2%	ND	0.1

Duplicate Conc. (ug/Kg)	Sample	Duplicate	%Diff	Accept Range	Detect. Limit
Benzene	ND	ND	0.0%	0 - 30%	0.9
Toluene	19.8	18.9	4.5%	0 - 30%	1.0
Ethylbenzene	17.6	18.3	4.0%	0 - 30%	1.0
p,m-Xylene	460	448	2.7%	0 - 30%	1.2
o-Xylene	102	109	6.2%	0 - 30%	0.9

Spike Conc. (ug/Kg)	Sample	Amount Spiked	Spiked Sample	% Recovery	Accept Range
Benzene	ND	500	534	107%	39 - 150
Toluene	19.8	500	579	111%	46 - 148
Ethylbenzene	17.6	500	584	113%	32 - 160
p,m-Xylene	460	1000	1,560	107%	46 - 148
o-Xylene	102	500	685	114%	46 - 148

ND - Parameter not detected at the stated detection limit.

Dilution: Spike and spiked sample concentration represent a dilution proportional to sample dilution.

References: Method 5030B, Purge-and-Trap, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.
 Method 8021B, Aromatic and Halogenated Volatiles by Gas Chromatography Using Photolionization and/or Electrolytic Conductivity Detectors, SW-846, USEPA December 1996.

Comments: QA/QC for Samples 56708, 56710-56711, 56713, 56715-56716, 56724-56725

Analyst

Review

Client:	WPX	Project #:	04108-0136
Sample ID:	Blow-Pit	Date Reported:	12-14-10
Laboratory Number:	56725	Date Sampled:	12-08-10
Chain of Custody No:	10877	Date Received:	12-10-10
Sample Matrix:	Soil	Date Extracted:	12-14-10
Preservative:	Cool	Date Analyzed:	12-14-10
Condition:	Intact	Analysis Needed:	TPH-418.1

Parameter	Concentration (mg/kg)	Det. Limit (mg/kg)
Total Petroleum Hydrocarbons	25.8	6.8

ND = Parameter not detected at the stated detection limit.

References: Method 418.1, Petroleum Hydrocarbons, Total Recoverable, Chemical Analysis of Water and Waste, USEPA Storet No. 4551, 1978.

Comments: **Cox Canyon #7B**



Analyst



Review

Client:	QA/QC	Project #:	N/A
Sample ID:	QA/QC	Date Reported:	12-14-10
Laboratory Number:	12-14-TPH.QA/QC 56710	Date Sampled:	N/A
Sample Matrix:	Freon-113	Date Analyzed:	12-14-10
Preservative:	N/A	Date Extracted:	12-14-10
Condition:	N/A	Analysis Needed:	TPH

Calibration	I-Cal Date	C-Cal Date	I-Cal RF:	C-Cal RF:	% Difference	Accept. Range
	11-19-10	12-14-10	1,700	1,720	1.2%	+/- 10%

Blank Conc. (mg/Kg)	Concentration	Detection Limit
TPH	ND	6.8


Duplicate Conc. (mg/Kg)	Sample	Duplicate	% Difference	Accept. Range
TPH	24.5	25.8	5.3%	+/- 30%

Spike Conc. (mg/Kg)	Sample	Spike Added	Spike Result	% Recovery	Accept Range
TPH	24.5	2,000	2,310	114%	80 - 120%

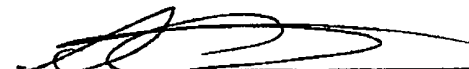
ND = Parameter not detected at the stated detection limit.

References: Method 418.1, Petroleum Hydrocarbons, Total Recoverable, Chemical Analysis of Water and Waste, USEPA Storet No. 4551, 1978.

Comments: QA/QC for Samples 56710-56711, 56725



 Analyst



 Review


Client:	WPX	Project #:	04108-0136
Sample ID:	Blow-Pit	Date Reported:	12-14-10
Lab ID#:	56725	Date Sampled:	12-08-10
Sample Matrix:	Soil	Date Received:	12-10-10
Preservative:	Cool	Date Analyzed:	12-13-10
Condition:	Intact	Chain of Custody:	10877

Parameter	Concentration (mg/Kg)
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Total Chloride**15**

Reference: U.S.E.P.A., 4500B, "Methods for Chemical Analysis of Water and Wastes", 1983.
Standard Methods For The Examination of Water And Waste Water", 18th ed., 1992.

Comments: **Cox Canyon #7B**

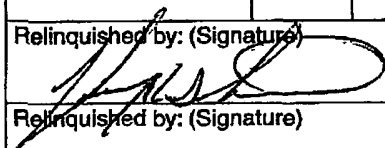


Analyst

Review

CHAIN OF CUSTODY RECORD

10877

Client: WPX			Project Name / Location: COX Canyon #7B			ANALYSIS / PARAMETERS													
Client Address: myke lane			Sampler Name: Johnny Stinson			TPH (Method 8015)	BTEX (Method 8021)	VOC (Method 8260)	RCRA 8 Metals	Cation / Anion	RCI	TCLP with H/P	PAH	TPH (418.1)	CHLORIDE			Sample Cool	Sample Intact
Client Phone No.:			Client No.: 04108-0136																
Sample No./ Identification	Sample Date	Sample Time	Lab No.	Sample Matrix	No./Volume of Containers	Preservative													
						H ₂ O	HCl												
Blood - Pit	12.8.10	11:30 AM	56725	Soil Solid	1													Y	Y
				Soil Solid															
				Soil Solid															
				Soil Solid															
				Soil Solid															
				Soil Solid															
				Soil Solid															
				Soil Solid															
				Soil Solid															
				Soil Solid															
				Soil Solid															
Relinquished by: (Signature) 					Date 12.10.10	Time 4:25 PM	Received by: (Signature) TRENTON KAOZ					Date 12/10/10	Time 4:25 PM						
Relinquished by: (Signature)							Received by: (Signature)												
Relinquished by: (Signature)							Received by: (Signature)												



envirotech
Analytical Laboratory

5796 US Highway 64 • Farmington, NM 87401 • 505-632-0615 • lab@envirotech-inc.com

Fields, Vanessa

From: johnny@adobecontractorsinc.com
Sent: Thursday, September 23, 2010 7:29 AM
To: Bill Liess; Mark Kelly; Randy Mckee; Robert Switzer; Sherrie Landon
Cc: Lane, Myke; Meador, Tasha; Fields, Vanessa; Lepich, Mark; Glen Shelby; Snyder, Walden
Subject: Williams Clean ups Cox Canyon #7B

We will start the clean up on the Cox canyon #7B on Monday, September 27th. Please let me know if you have any questions.

Thanks,

Johnny Stinson
Gen. Manager/ Adobe Contractors
Office: (505)632-1486
Mobile: (505)320-6076
johnny@adobecontractorsinc.com

Fields, Vanessa

From: johnny@adobecontractorsinc.com
Sent: Thursday, September 23, 2010 7:31 AM
To: Brandon Powell
Cc: Lane, Myke; Meador, Tasha; Fields, Vanessa; Lepich, Mark
Subject: Williams Clean up Cox Canyon #7B

Brandon,
We will start the clean up on the Cox Canyon #7B on Monday, September 27th. Please let me know if you have any questions.

Thanks,

Johnny Stinson
Gen. Manager/ Adobe Contractors
Office: (505)632-1486
Mobile: (505)320-6076
johnny@adobecontractorsinc.com

UNITED STATES
DEPARTMENT OF INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires March 31, 1993

SUNDRY NOTICE AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir Use "APPLICATION TO DRILL" for permit for such proposals

5. Lease Designation and Serial No.
NM-03190

6 If Indian, Allottee or Tribe Name
N/A

7. If Unit or CA, Agreement Designation
Cox Canyon

SUBMIT IN TRIPLICATE

1. Type of Well
Oil Well ☒ Gas Well ☐ Other ☐

8. Well Name and No.
Cox Canyon #7B

2. Name of Operator
WILLIAMS PRODUCTION COMPANY

9. API Well No.
30-045-33022

3. Address and Telephone No
PO BOX 640 Aztec, NM 87410-0640

10. Field and Pool, or Exploratory Area
Blanco MV

4 Location of Well (Footage, Sec , T., R., M , or Survey Description)
Surface 1140' FNL & 1560' FEL Sec. 17, T32N, R11W
Proposed Prod Zone. 660' FNL, 1950' FWL

11 County or Parish, State
San Juan, NM

CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

TYPE OF ACTION

☒ Notice of Intent

☐ Subsequent Report

☐ Final Abandonment

☐ Abandonment

☐ Recompletion

☐ Plugging Back

☐ Casing Repair

☐ Altering Casing

☒ Other request for extension

☐ Change of Plans

☐ New Construction

☐ Non-Routine Fracturing

☐ Water Shut-Off

☐ Conversion to Injection

☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Williams Production Company, LLC. hereby requests a one year extension of the above referenced permit. Due to rig availability Williams has been unable to drill this well in the previous year but plans to drill this well in the upcoming drilling season.

14. I hereby certify that the foregoing is true and correct

Signed Larry Higgins

Title Drilling COM Date _____

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any.

Title 18 U S C Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

UNITED STATES
DEPARTMENT OF INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICE AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION TO DRILL" for permit for such proposals

5. Lease Designation and Serial No
NM-03190

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE

7. If Unit or CA, Agreement Designation
Cox Canyon

1. Type of Well
Oil Well ☒ Gas Well ☐ Other ☐

8. Well Name and No.
Cox Canyon Unit #007B

2. Name of Operator
WILLIAMS PRODUCTION COMPANY

9. API Well No.
30-045-33022

3. Address and Telephone No.
PO Box 640 Aztec, NM 87410-0640 (505) 634-4208

10. Field and Pool, or Exploratory Area
BLANCO MESAVERDE

4. Location of Well (Footage, Sec , T., R , M , or Survey Description)
1140 FNL & 1560 FWL (sur), 660 FNL & 1950 FWL (bhl), Sec 17, T32N, R11W

11. County or Parish, State
San Juan, New Mexico

CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment

TYPE OF ACTION

Abandonment
Recompletion
Plugging Back
Casing Repair
Altering Casing
☒ Other Formation Change and Casing
Design Change

Change of Plans
New Construction
Non-Routine Fracturing
Water Shut-Off
Conversion to Injection
Dispose Water
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Williams Production Company, LLC, plans to drill this well as a Mesaverde stand alone and has changed the casing design as per the attached Directional Proposal and Operations Plan.

14. I hereby certify that the foregoing is true and correct

Signed Larry Higgins

Title Drilling C.O.M

Date November 16, 2010

(This space for Federal or State office use)

Approved by _____

Title _____

Date _____

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

UNITED STATES
DEPARTMENT OF INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires March 31, 1993

SUNDRY NOTICE AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir Use "APPLICATION TO DRILL" for permit for such proposals

5. Lease Designation and Serial No
NM-03190

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE

7. If Unit or CA, Agreement Designation
Cox Canyon

1. Type of Well
Oil Well ☒ Gas Well ☐ Other ☐

8. Well Name and No.
Cox Canyon #007B

2. Name of Operator
WILLIAMS PRODUCTION COMPANY

9. API Well No.
30-045-33022

3. Address and Telephone No.
PO Box 640 Aztec, NM 87410-0640

10. Field and Pool, or Exploratory Area
BLANCO MV/BASIN DK

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1140 FSNL & 1560 FWL (sur), 660 FNL & 1950 FWL (bhl), Sec 17, T32N, R11W

11. County or Parish, State
San Juan, New Mexico

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

TYPE OF ACTION

Notice of Intent

☒ Subsequent Report

Final Abandonment

Abandonment

Recompletion

Plugging Back

Casing Repair

Altering Casing

☒ Other Multiple zone completion

Change of Plans

New Construction

Non-Routine Fracturing

Water Shut-Off

Conversion to Injection

Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Williams Production Company, LLC. hereby requests
authority to drill this as a Mesa Verde/Dakota dual as per attached
directional and operations plan.

14. I hereby certify that the foregoing is true and correct

Signed Larry Higgins

Title Drilling C.O.M.

Date November 16, 2010

(This space for Federal or State office use)

Approved by _____

Title _____

Date _____

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

UNITED STATES
DEPARTMENT OF INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICE AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir Use "APPLICATION TO DRILL" for permit for such proposals

SUBMIT IN TRIPLICATE		5.	Lease Designation and Serial No NM-03190
		6.	If Indian, Allottee or Tribe Name N/A
		7.	If Unit or CA, Agreement Designation Cox Canyon Unit
1	Type of Well Oil Well Gas Well X Other	8.	Well Name and No. Cox Canyon Unit #7B
2	Name of Operator WILLIAMS PRODUCTION COMPANY	9.	API Well No. 30-045-33022
3.	Address and Telephone No. PO BOX 640 Aztec, NM 87410-0640	10.	Field and Pool, or Exploratory Area Blanco MV/Basin DK
4.	Location of Well (Footage, Sec., T., R , M., or Survey Description) Surface. 1140' FNL & 1560' FWL Sec. 17, T32N, R11W BHL 660' FNL & 1950' FWL	11.	County or Parish, State San Juan, NM

CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans
X Subsequent Report	Recompletion	New Construction
Final Abandonment	Plugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
	Altering Casing	Conversion to Injection
	X Other <u>request for extension</u>	Dispose Water
		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Williams Production Company, LLC. Here by requests an extension of the above referenced permit. The original permit expires on 8/15/09. Williams plans to SPUD this well no later then the end of the 1st quarter of 2010.

14	I hereby certify that the foregoing is true and correct		
	Signed _____ Larry Higgins	Title <u>Drilling COM</u>	Date <u>7/20/09</u>
(This space for Federal or State office use)			
	Approved by _____	Title _____	Date _____
Conditions of approval, if any:			

UNITED STATES
DEPARTMENT OF INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No 1004-0135
Expires March 31, 1993

SUNDRY NOTICE AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION TO DRILL" for permit for such proposals

SUBMIT IN TRIPLICATE		5.	Lease Designation and Serial No NM-03190
		6.	If Indian, Allottee or Tribe Name N/A
		7.	If Unit or CA, Agreement Designation Cox Canyon Unit
1.	Type of Well Oil Well Gas Well X Other	8.	Well Name and No. Cox Canyon Unit #7B
2.	Name of Operator WILLIAMS PRODUCTION COMPANY	9.	API Well No. 30-045-33022
3.	Address and Telephone No PO BOX 640 Aztec, NM 87410-0640	10.	Field and Pool, or Exploratory Area Blanco MV/Basin DK
4.	Location of Well (Footage, Sec., T., R., M., or Survey Description) Surface: 1140' FNL & 1560' FWL Sec. 17, T32N, R11W BHL 660' FNL & 1950' FWL	11.	County or Parish, State San Juan, NM

CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
X Notice of Intent	Abandonment	Change of Plans
Subsequent Report	Recompletion	New Construction
Final Abandonment	Plugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
	Altering Casing	Conversion to Injection
	X Other <u>request for extension</u>	Dispose Water
		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Williams Production Company, LLC. hereby requests an extension of the above referenced permit. The original permit expires on 8-15-07. Due to rig availability Williams has been unable to drill this well in the previous year but plans to drill this well in the upcoming drilling season.

14. I hereby certify that the foregoing is true and correct

Signed Larry Higgins Title Drilling COM Date _____

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: CC #7B	API #:
------------------------------	---------------

Pit Type: X <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) X <input type="checkbox"/> Weekly (Tech)
--	--

Pit Liner intact (no visible tears)	X <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	X <input type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Samantha Ivie		
Title: Field Tech II		
Date: 8/9/10 Phone: 505-486-3003		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: CC #7B	API #:
------------------------------	---------------

Pit Type: X <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) X <input type="checkbox"/> Weekly (Tech)
---	--

Pit Liner intact (no visible tears)	X <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	X <input type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Samantha Ivie		
Title: Field Tech I		
Date: 4/9/10 Phone: 505-486-3003		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: CC #7B	API #:
------------------------------	---------------

Pit Type: X <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) X <input type="checkbox"/> Weekly (Tech)
---	--

Pit Liner intact (no visible tears)	X <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	X <input type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Samantha Ivie		
Title: Field Tech I		
Date: 3/31/10 Phone: 505-486-3003		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: CC #7B	API #:
------------------------------	---------------

Pit Type: X <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) X <input type="checkbox"/> Weekly (Tech)
---	--

Pit Liner intact (no visible tears)	X <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	X <input type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Samantha Ivie		
Title: Field Tech II		
Date: 5/10/10 Phone: 505-486-3003		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: CC #7B	API #:
------------------------------	---------------

Pit Type: X <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) X <input type="checkbox"/> Weekly (Tech)
---	--

Pit Liner intact (no visible tears)	X <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	X <input type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Samantha Ivie		
Title: Field Tech II		
Date: 5/17/10 Phone: 505-486-3003		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: CC #7B	API #:
------------------------------	---------------

Pit Type: X <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) X <input type="checkbox"/> Weekly (Tech)
---	--

Pit Liner intact (no visible tears)	X <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	X <input type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Samantha Ivie		
Title: Field Tech II		
Date: 5/24/10 Phone: 505-486-3003		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: CC #7B	API #:
------------------------------	---------------

Pit Type: X <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) X <input type="checkbox"/> Weekly (Tech)
---	--

Pit Liner intact (no visible tears)	X <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	X <input type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Samantha Ivie		
Title: Field Tech II		
Date: 6/7/10 Phone: 505-486-3003		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
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Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: CC #7B	API #:
------------------------------	---------------

Pit Type: X <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) X <input type="checkbox"/> Weekly (Tech)
---	--

Pit Liner intact (no visible tears)	X <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	X <input type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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Comments:		
Inspector Signature:		
Printed Name: Samantha Ivie		
Title: Field Tech II		
Date: 6/14/10 Phone: 505-486-3003		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: CC #7B	API #:
------------------------------	---------------

Pit Type: <input checked="" type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Samantha Ivie		
Title: Field Tech II		
Date: 6/25/10 Phone: 505-486-3003		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: CC #7B	API #:
------------------------------	---------------

Pit Type: <input checked="" type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Samantha Ivie		
Title: Field Tech II		
Date: 7/13/10 Phone: 505-486-3003		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: CC #7B	API #:
------------------------------	---------------

Pit Type: X <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) X <input type="checkbox"/> Weekly (Tech)
---	--

Pit Liner intact (no visible tears)	X <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	X <input type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Samantha Ivie		
Title: Field Tech II		
Date: 7/19/10 Phone: 505-486-3003		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

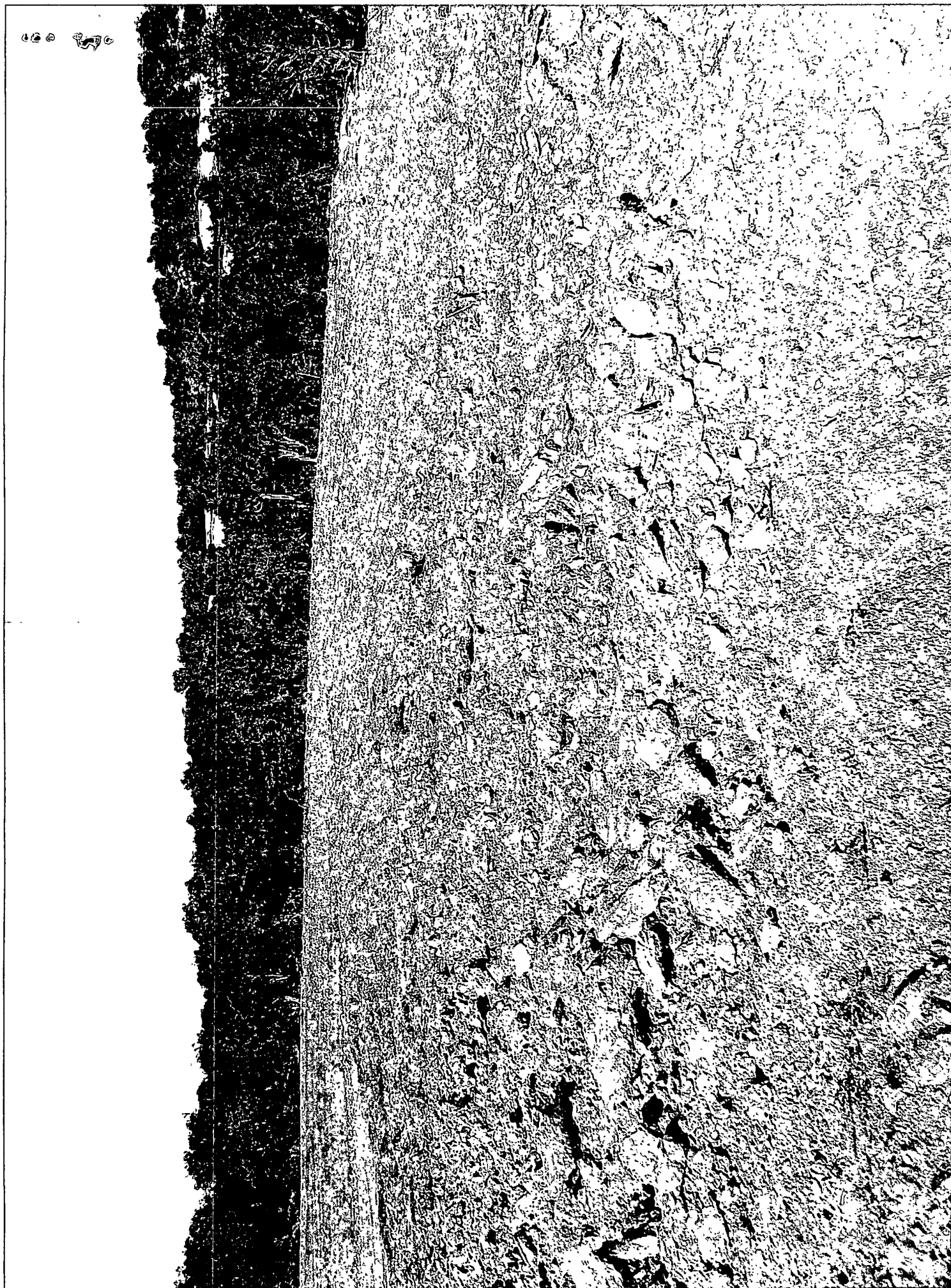
FACILITY INFORMATION

Facility Name: CC #7B	API #:
------------------------------	---------------

Pit Type: X <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) X <input type="checkbox"/> Weekly (Tech)
---	--

Pit Liner intact (no visible tears)	X <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	X <input type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	X <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Samantha Ivie		
Title: Field Tech II		
Date: 8/9/10 Phone: 505-486-3003		

Record Retention: Submit with Closure
File: EH&S Well Files



WILLIAMS PROD
CO/CANYON #7B
UNIT C SEC. 17
T32N R11W
SAN JUAN CO
IN PLACE BURIAL



Exploration & Production
PO Box 640
Aztec, NM 87410
505/634-4219
505/634-4205 fax



Transmittal

To: Brandon Powell
NMOCD
1000 Rio Brazos Road
Aztec, New Mexico 87410

From: Tasha Meador
San Juan- Permitting Technician
505-634-4241
tasha.meador@williams.com

Date:

Re: Supplemental Submittal

Temporary Pit Closure report: NMOCD Permit # 7365

Enclosed and per your direction, please find our supplemental submittal for the referenced temporary pit closure report.

Please advise if additional information is required. Thank you for your time and consideration. Please call or contact me if there are any questions.

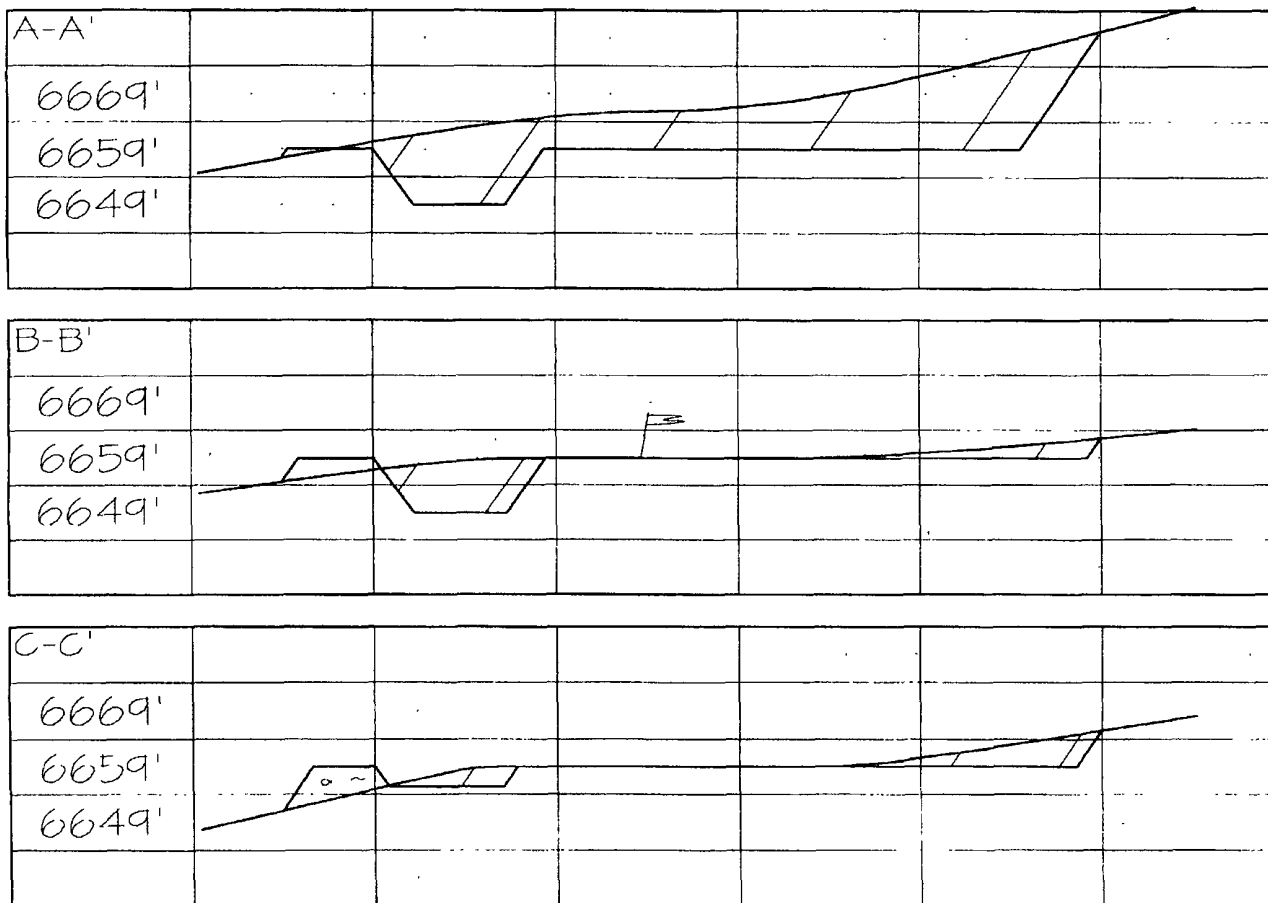
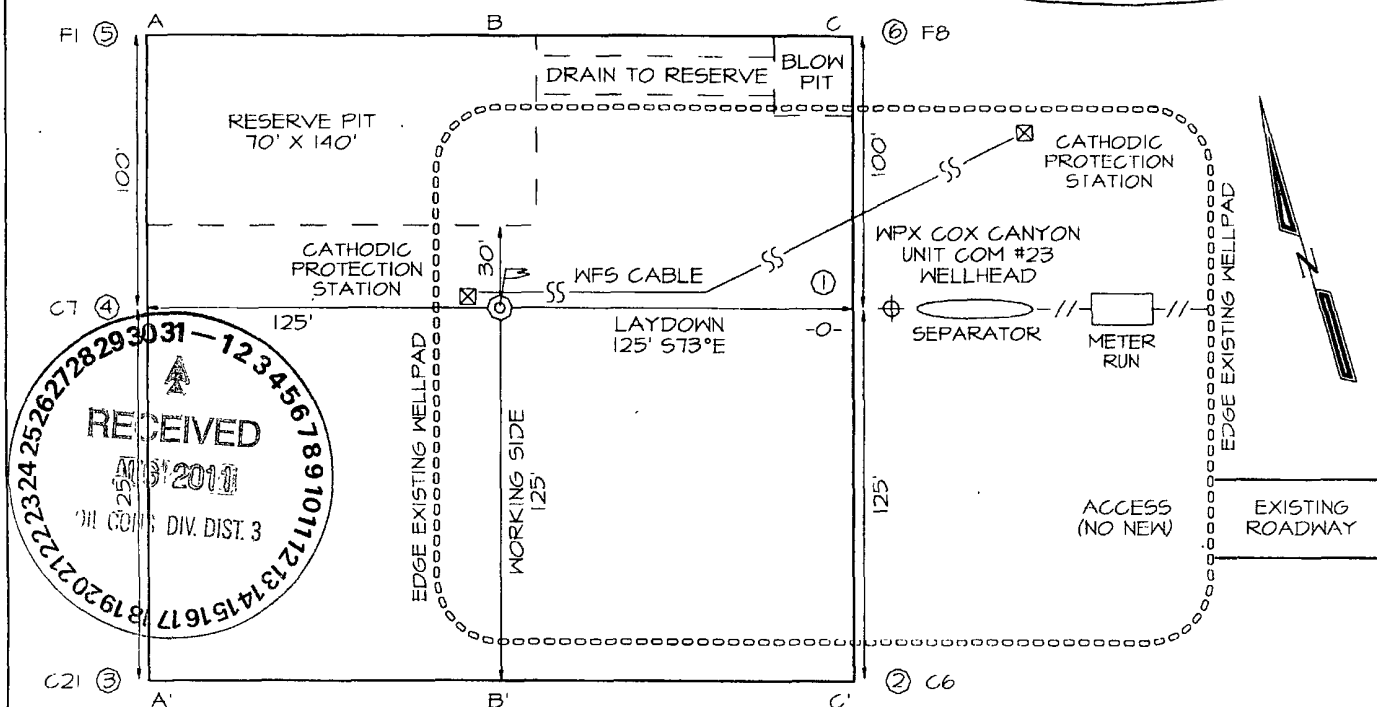
Respectfully resubmitted,

Tasha Meador
Williams Exploration & Production
721 S Main Aztec, NM
Office: 505-634-4200
Direct: 505-634-4241
Fax: 505-634-4205
tasha.meador@williams.com

Encl:

WILLIAMS PRODUCTION COX CANYON UNIT #7B
1140' FNL & 1560' FWL, SECTION 17, T32N, R11W
NMPM, SAN JUAN COUNTY, NEW MEXICO
GROUND ELEVATION: 6659'

LATITUDE: 36°59'21"
LONGITUDE: 108°00'53"
 DATUM: NAD1921



Submit To Appropriate District Office Two Copies District I 1625 N French Dr., Hobbs, NM 88240 District II 1301 W Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S St Francis Dr., Santa Fe, NM 87505	State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505	Form C-105 July 17, 2008 1. WELL API NO. 30-045-33022 2. Type of Lease <input type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> FED/INDIAN 3. State Oil & Gas Lease No NM-03190
--	---	--

WELL COMPLETION OR RECOMPLETION REPORT AND LOG											
4. Reason for filing: <input type="checkbox"/> COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) <input checked="" type="checkbox"/> C-144 CLOSURE ATTACHMENT (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)								5. Lease Name or Unit Agreement Name Cox Canyon			
7. Type of Completion <input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER								6. Well Number Cox Canyon #007B			
8. Name of Operator WILLIAMS PRODUCTION, LLC								9. OGRID 120782			
10. Address of Operator P.O. BOX 640 AZTEC, NM 87410								11. Pool name or Wildcat			
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County	
Surface:											
BH:											
13. Date Spudded	14. Date T.D. Reached	15. Date Rig Released 4/20/2010		16. Date Completed (Ready to Produce)			17. Elevations (DF and RKB, RT, GR, etc.)				
18. Total Measured Depth of Well		19. Plug Back Measured Depth		20. Was Directional Survey Made?			21. Type Electric and Other Logs Run				
22. Producing Interval(s), of this completion - Top, Bottom, Name											

23. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB /FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED

24. LINER RECORD					25. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

26. Perforation record (interval, size, and number)				27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED			

28. PRODUCTION							
Date First Production		Production Method (<i>Flowing, gas lift, pumping - Size and type pump</i>)				Well Status (<i>Prod. or Shut-in</i>)	
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl	Gas - Oil Ratio
Flow Tubing Press	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl	Oil Gravity - API - (<i>Corr.</i>)	
29. Disposition of Gas (<i>Sold, used for fuel, vented, etc.</i>)						30. Test Witnessed By	
31. List Attachments							
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.							
33. If an on-site burial was used at the well, report the exact location of the on-site burial:							

Latitude 36 99268 Longitude. 107 99716 NAD 1927 1983

I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief

 Tasha Meador Printed Name

 Signature Title Permit Technician Date

E-mail Address: tasha.meador@williams.com