

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.

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 Rosa Unit 145D
API Number: 30-04535002 OCD Permit Number _____
U/L or Qtr/Qtr A Section 16 Township 31N Range 6W County. San Juan
Center of Proposed Design Latitude 36 90498N Longitude -107 46109W 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 _____

29 30 31 12 3 4 5 6

4

☐ **Below-grade tank:** Subsection I of 19 15 17 11 NMAC

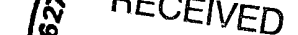
Volume _____ bbl Type of fluid _____

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 _____

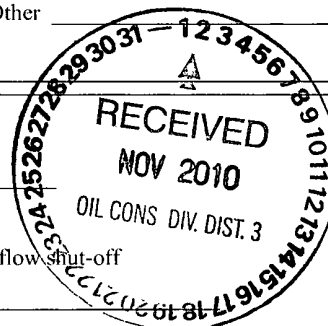
Liner type Thickness _____ mil ☐ HDPE ☐ PVC ☐ Other _____



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 | <p>Fencing: Subsection D of 19 15 17 11 NMAC (<i>Applies to permanent pits, temporary pits, and below-grade tanks</i>)</p> <p><input type="checkbox"/> Chain link, six feet in height, two strands of barbed wire at top (<i>Required if located within 1000 feet of a permanent residence, school, hospital, institution or church</i>)</p> <p><input type="checkbox"/> Four foot height, four strands of barbed wire evenly spaced between one and four feet</p> <p><input checked="" type="checkbox"/> Alternate Please specify <u>As per BLM specifications</u></p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | <p>Netting: Subsection E of 19 15 17 11 NMAC (<i>Applies to permanent pits and permanent open top tanks</i>)</p> <p><input type="checkbox"/> Screen <input type="checkbox"/> Netting <input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Monthly inspections (If netting or screening is not physically feasible)</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 | <p>Signs: Subsection C of 19.15.17 11 NMAC</p> <p><input type="checkbox"/> 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers</p> <p><input checked="" type="checkbox"/> Signed in compliance with 19 15.3 103 NMAC</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9 | <p>Administrative Approvals and Exceptions:</p> <p>Justifications and/or demonstrations of equivalency are required Please refer to 19 15 17 NMAC for guidance.</p> <p>Please check a box if one or more of the following is requested, if not leave blank:</p> <p><input checked="" type="checkbox"/> Administrative approval(s) Requests must be submitted to the appropriate division district or the Santa Fe Environmental Bureau office for consideration of approval</p> <p><input type="checkbox"/> Exception(s) Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10 | <p>Siting Criteria (regarding permitting): 19.15 17 10 NMAC</p> <p>Instructions: <i>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.</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 85%;">Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank</td> <td style="width: 15%; text-align: right;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </td> </tr> <tr> <td>- NM Office of the State Engineer - iWATERS database search, USGS, Data obtained from nearby wells</td> <td></td> </tr> <tr> <td>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)</td> <td style="text-align: right;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </td> </tr> <tr> <td>- Topographic map, Visual inspection (certification) of the proposed site</td> <td></td> </tr> <tr> <td>Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application (<i>Applies to temporary, emergency, or cavitation pits and below-grade tanks</i>)</td> <td style="text-align: right;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA </td> </tr> <tr> <td>- Visual inspection (certification) of the proposed site; Aerial photo, Satellite image</td> <td></td> </tr> <tr> <td>Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application (<i>Applies to permanent pits</i>)</td> <td style="text-align: right;"> <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA </td> </tr> <tr> <td>- Visual inspection (certification) of the proposed site, Aerial photo, Satellite image</td> <td></td> </tr> <tr> <td>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</td> <td style="text-align: right;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </td> </tr> <tr> <td>- NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site</td> <td></td> </tr> <tr> <td>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</td> <td style="text-align: right;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </td> </tr> <tr> <td>- Written confirmation or verification from the municipality, Written approval obtained from the municipality</td> <td></td> </tr> <tr> <td>Within 500 feet of a wetland</td> <td style="text-align: right;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </td> </tr> <tr> <td>- US Fish and Wildlife Wetland Identification map, Topographic map, Visual inspection (certification) of the proposed site</td> <td></td> </tr> <tr> <td>Within the area overlying a subsurface mine.</td> <td style="text-align: right;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </td> </tr> <tr> <td>- Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division</td> <td></td> </tr> <tr> <td>Within an unstable area.</td> <td style="text-align: right;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </td> </tr> <tr> <td>- Engineering measures incorporated into the design, NM Bureau of Geology & Mineral Resources, USGS; NM Geological Society, Topographic map</td> <td></td> </tr> <tr> <td>Within a 100-year floodplain</td> <td style="text-align: right;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </td> </tr> <tr> <td>- FEMA map</td> <td></td> </tr> </table> | Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | - NM Office of the State Engineer - iWATERS database search, USGS, Data obtained from nearby wells | | 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) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | - Topographic map, Visual inspection (certification) of the proposed site | | Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application (<i>Applies to temporary, emergency, or cavitation pits and below-grade tanks</i>) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA | - Visual inspection (certification) of the proposed site; Aerial photo, Satellite image | | Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application (<i>Applies to permanent pits</i>) | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA | - Visual inspection (certification) of the proposed site, Aerial photo, Satellite image | | 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 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | - NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site | | 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 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | - Written confirmation or verification from the municipality, Written approval obtained from the municipality | | Within 500 feet of a wetland | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | - US Fish and Wildlife Wetland Identification map, Topographic map, Visual inspection (certification) of the proposed site | | Within the area overlying a subsurface mine. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division | | Within an unstable area. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | - Engineering measures incorporated into the design, NM Bureau of Geology & Mineral Resources, USGS; NM Geological Society, Topographic map | | Within a 100-year floodplain | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | - FEMA map | |
| Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - NM Office of the State Engineer - iWATERS database search, USGS, Data obtained from nearby wells | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - Topographic map, Visual inspection (certification) of the proposed site | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application (<i>Applies to temporary, emergency, or cavitation pits and below-grade tanks</i>) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - Visual inspection (certification) of the proposed site; Aerial photo, Satellite image | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application (<i>Applies to permanent pits</i>) | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - Visual inspection (certification) of the proposed site, Aerial photo, Satellite image | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - Written confirmation or verification from the municipality, Written approval obtained from the municipality | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Within 500 feet of a wetland | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - US Fish and Wildlife Wetland Identification map, Topographic map, Visual inspection (certification) of the proposed site | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Within the area overlying a subsurface mine. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Within an unstable area. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - Engineering measures incorporated into the design, NM Bureau of Geology & Mineral Resources, USGS; NM Geological Society, Topographic map | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Within a 100-year floodplain | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - FEMA map | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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☐ AlternativeProposed 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

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 identify 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

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 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 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 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 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 | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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 | <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 - Visual inspection (certification) of the proposed site, Aerial photo, Satellite image | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 | <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 |

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: 8/16/2010

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 90498 Longitude -107 46109 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 Vanessa Fields Date 11/1/2010

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

Williams Production Co., LLC
San Juan Basin: New Mexico Assets
Temporary Pit In-place Closure Report
Drilling/Completion and Workover
(Groundwater >100 feet bgs)

Well: Rosa Unit # 145D
API No: 30-04535002
Location: A-S#16 T # 31N R# 06W 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.
To the extent practical, free liquids were pulled from the reserve pit following the completion rig off. Haul dates was 11/14/2009 to (Rosa Unit SWD #001 (Order SWD-916, API 3003927055).
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 (8/13/2009).
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, recontoured and reseeded in progress.
Drill rig-off (9/30/2009). Request for transfer to completion rig submitted (7/31/2010) to OCD Aztec District Office, Completion rig-off (10/15/2009). Pit covered (8/6/2010). 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 (8/2/2010) 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. 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.

8. Following removal of free liquids, the pit contents were solidified using a Bowl Decanter Centrifuge. As the waste contents of the pit did not provide sufficient space to place the required four-foot cover, a portion of the waste was transported to the Bondad Landfill, La Plata Co, Colorado and operated by Waste Corporation of America under CDPHE Permit # CRS 30-20112. The remaining oil contents were stabilized by mixing non-waste containing earthen material in order to achieve a consistency that was deemed safe and stable. The mixing ration was approximately 2.5 part native soil to 1 part pit contents. Solidification was completed (8/10/2010). Returned in the spring of 2010 to continue reclamation of area due to winter closure.

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 >100 bgs.

| Components. | Testing Methods | Limits (mg/Kg) | Pit (mg/Kg) |
|-------------|-----------------------------------|----------------|-------------|
| Benzene | EPA SW-846 Method 8021B or 8260B | 0.2 | ND |
| BTEX | EPA SW-846 Method 8021B or 8260B | 50 | 1.3 |
| TPH | EPA SW-846 Method 418.1 | 2500 | 66.3 |
| GRO/DRO | EPA SW-846 Method 8015M (GRO/DRO) | 500 | ND |
| Chlorides | EPA SW-846 Method 300.1 | 500 | 35 |

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 revegetation 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 recon toured 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 storm water 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 (8/16/2010).

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.

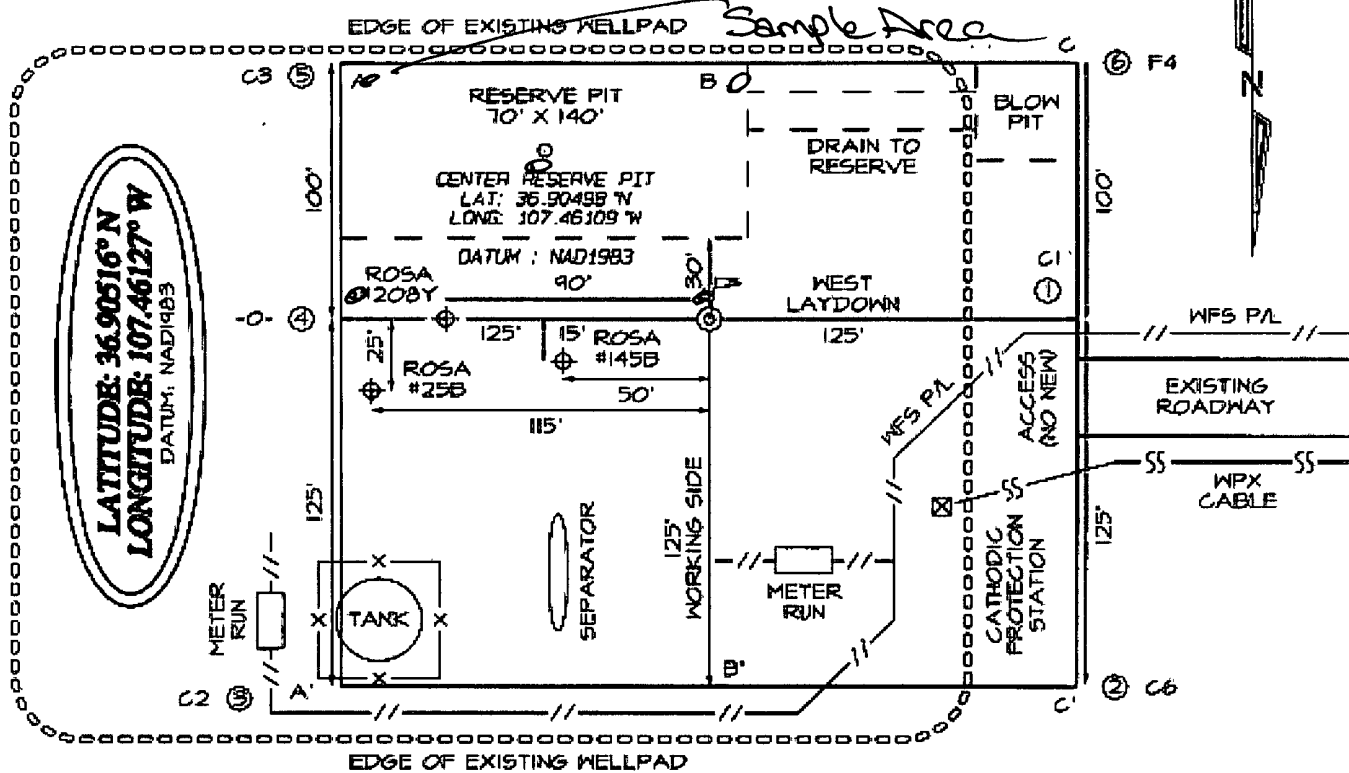
13. WPX shall seed the disturbed areas the first growing season after the pit is covered. Seeding will be accomplished via drilling on the contour whenever practical, or by other Division-approved methods. Vegetative cover will equal 70% of the native perennial vegetative cover (un-impacted) consisting 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.

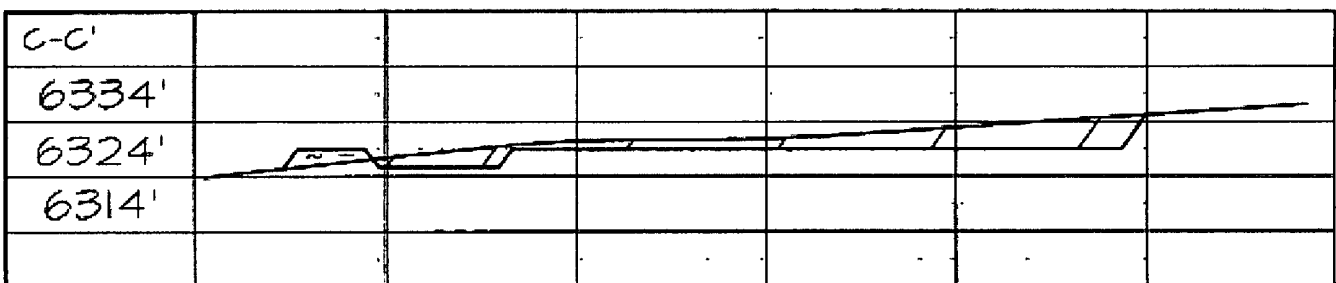
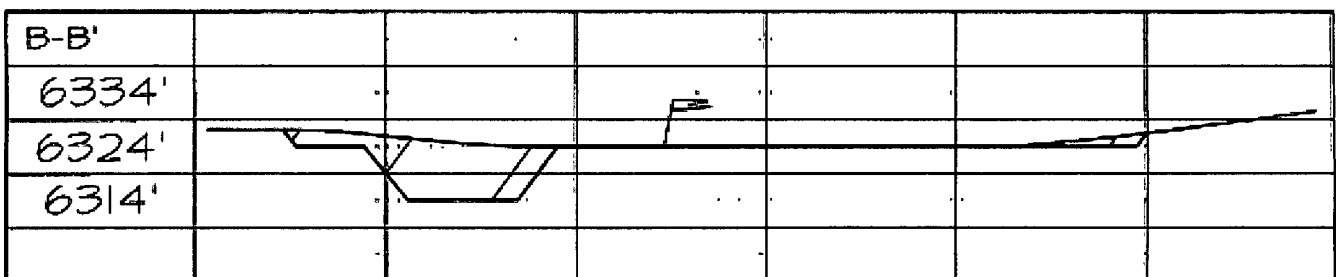
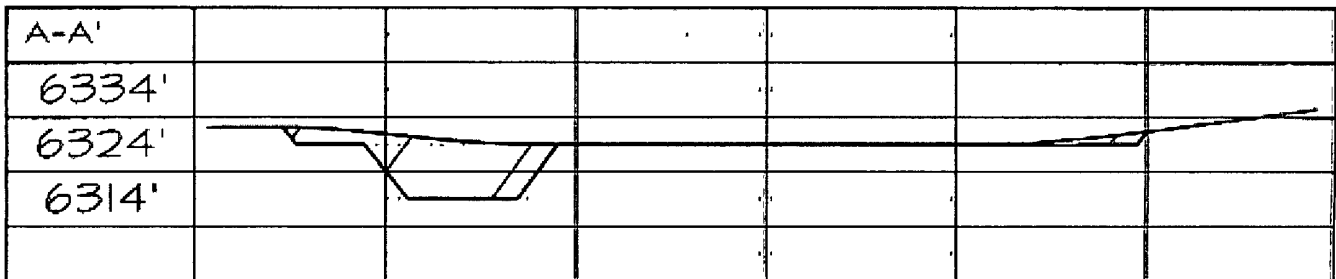
14. The temporary pit will be located with a steel marker, no less than four inches in diameter, cemented in a hole three feet deep in the center of the onsite burial upon the abandonment of all wells on the pad. The marker will be flush with the ground to allow access of the active well pad and for 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 onsite 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, S26-T31N-R05W-F, "Pit Burial" (photo attached). Steel marker set (9-10-2010).

WILLIAMS PRODUCTION COMPANY ROSA UNIT #145D
610' FNL & 610' FEL, SECTION 16, T31N, R6W, NMPM
SAN JUAN COUNTY, NEW MEXICO ELEVATION: 6324'



Steel T-Pipes have been set to define the Edge of Disturbance limits which are 50' offset from the edge of the stacked wellpad.



FILENAME: 31616A12

SHEET 2 OF 5

NCE SURVEYS, INC.

DRAWN BY: EDO

CHECKED BY: JCE



envirotech
Analytical Laboratory

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

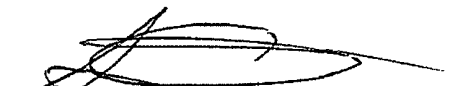
| | | | |
|----------------------|-------------|---------------------|------------|
| Client: | WPX | Project #: | 04108-0136 |
| Sample ID: | Reserve Pit | Date Reported: | 08-18-10 |
| Laboratory Number: | 55574 | Date Sampled: | 08-13-10 |
| Chain of Custody No: | 10196 | Date Received: | 08-16-10 |
| Sample Matrix: | Soil | Date Extracted: | 08-16-10 |
| Preservative: | Cool | Date Analyzed: | 08-17-10 |
| Condition: | Intact | Analysis Requested: | 8015 TPH |

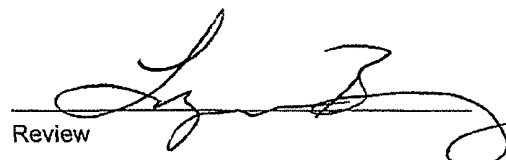
| Parameter | Concentration (mg/Kg) | Det. Limit (mg/Kg) |
|------------------------------|--------------------------|--------------------------|
| Gasoline Range (C5 - C10) | ND | 0.2 |
| Diesel Range (C10 - C28) | ND | 0.1 |
| Total Petroleum Hydrocarbons | ND | 0.2 |

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: Rosa Unit #145D


Analyst


Review



EPA Method 8015 Modified
Nonhalogenated Volatile Organics
Total Petroleum Hydrocarbons

Quality Assurance Report

| | | | |
|--------------------|--------------------|---------------------|----------|
| Client: | QA/QC | Project #: | N/A |
| Sample ID: | 08-17-10 QA/QC | Date Reported: | 08-17-10 |
| Laboratory Number: | 55571 | Date Sampled: | N/A |
| Sample Matrix: | Methylene Chloride | Date Received: | N/A |
| Preservative: | N/A | Date Analyzed: | 08-17-10 |
| Condition: | N/A | Analysis Requested: | TPH |

| | I-Cal Date | I-Cal RF | C-Cal RF | % Difference | Accept Range |
|-------------------------|------------|-------------|-------------|--------------|--------------|
| Gasoline Range C5 - C10 | 08-17-10 | 9.9960E+002 | 1.0000E+003 | 0.04% | 0 - 15% |
| Diesel Range C10 - C28 | 08-17-10 | 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 |
| Total Petroleum Hydrocarbons | ND | 0.2 |

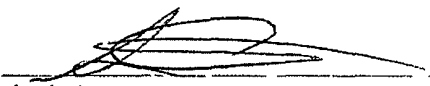
| Duplicate Conc. (mg/Kg) | Sample | Duplicate | % Difference | Accept Range |
|-------------------------|--------|-----------|--------------|--------------|
| Gasoline Range C5 - C10 | ND | ND | 0.0% | 0 - 30% |
| Diesel Range C10 - C28 | ND | ND | 0.0% | 0 - 30% |

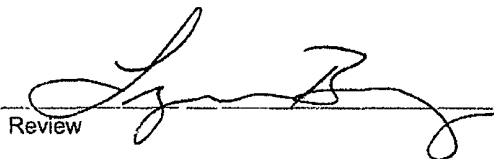
| Spike Conc. (mg/Kg) | Sample | Spike Added | Spike Result | % Recovery | Accept Range |
|-------------------------|--------|-------------|--------------|------------|--------------|
| Gasoline Range C5 - C10 | ND | 250 | 257 | 103% | 75 - 125% |
| Diesel Range C10 - C28 | ND | 250 | 252 | 101% | 75 - 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 55571-55576


Analyst


Review



EPA METHOD 8021
AROMATIC VOLATILE ORGANICS

| | | | |
|--------------------|-------------|---------------------|------------|
| Client: | WPX | Project #: | 04108-0136 |
| Sample ID: | Reserve Pit | Date Reported: | 08-18-10 |
| Laboratory Number: | 55574 | Date Sampled: | 08-13-10 |
| Chain of Custody: | 10196 | Date Received: | 08-16-10 |
| Sample Matrix: | Soil | Date Analyzed: | 08-17-10 |
| Preservative: | Cool | Date Extracted: | 08-16-10 |
| Condition: | Intact | Analysis Requested: | BTEX |

| Parameter | Concentration (ug/Kg) | Det. Limit (ug/Kg) |
|--------------|--------------------------|--------------------------|
| Benzene | ND | 0.9 |
| Toluene | ND | 1.0 |
| Ethylbenzene | 1.3 | 1.0 |
| p,m-Xylene | ND | 1.2 |
| o-Xylene | ND | 0.9 |
| Total BTEX | 1.3 | |


ND - Parameter not detected at the stated detection limit.


| Surrogate Recoveries: | Parameter | Percent Recovery |
|-----------------------|---------------------|------------------|
| | Fluorobenzene | 99.3 % |
| | 1,4-difluorobenzene | 103 % |
| | Bromochlorobenzene | 99.3 % |

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: Rosa Unit #145D


Analyst


Review



EPA METHOD 8021
AROMATIC VOLATILE ORGANICS

| | | | |
|--------------------|----------------|----------------|----------|
| Client: | N/A | Project #: | N/A |
| Sample ID: | 0817BBLK QA/QC | Date Reported: | 08-17-10 |
| Laboratory Number: | 55571 | Date Sampled: | N/A |
| Sample Matrix: | Soil | Date Received: | N/A |
| Preservative: | N/A | Date Analyzed: | 08-17-10 |
| Condition: | N/A | Analysis: | BTEX |

| Calibration and Detection Limits (ug/L) | I-Cal RF | O-Cal RF | %Diff | Blank Conc | Detect Limit |
|--|-------------|----------------------|-------|---------------|-----------------|
| | | Accept Range 0 - 15% | | | |
| Benzene | 8.3627E+005 | 8.3795E+005 | 0.2% | ND | 0.1 |
| Toluene | 9.3497E+005 | 9.3684E+005 | 0.2% | ND | 0.1 |
| Ethylbenzene | 8.6362E+005 | 8.6535E+005 | 0.2% | ND | 0.1 |
| p,m-Xylene | 2.1295E+006 | 2.1338E+006 | 0.2% | ND | 0.1 |
| o-Xylene | 7.6544E+005 | 7.6697E+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 | 50.0 | 50.1 | 100% | 39 - 150 |
| Toluene | ND | 50.0 | 50.4 | 101% | 46 - 148 |
| Ethylbenzene | ND | 50.0 | 49.2 | 98.3% | 32 - 160 |
| p,m-Xylene | ND | 100 | 100 | 100% | 46 - 148 |
| o-Xylene | ND | 50.0 | 50.2 | 100% | 46 - 148 |

ND - Parameter not detected at the stated detection limit.

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 55571-55576, 55548-55550


 Analyst


 Review



EPA METHOD 418.1
TOTAL PETROLEUM
HYDROCARBONS


| | | | |
|----------------------|-------------|------------------|------------|
| Client: | WPX | Project #: | 04108-0136 |
| Sample ID: | Reserve Pit | Date Reported: | 08-18-10 |
| Laboratory Number: | 55574 | Date Sampled: | 08-13-10 |
| Chain of Custody No: | 10196 | Date Received: | 08-16-10 |
| Sample Matrix: | Soil | Date Extracted: | 08-18-10 |
| Preservative: | Cool | Date Analyzed: | 08-18-10 |
| Condition: | Intact | Analysis Needed: | TPH-418.1 |

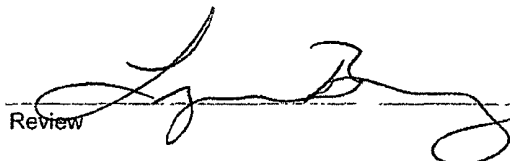
| Parameter | Concentration (mg/kg) | Det. Limit (mg/kg) |
|------------------------------|--------------------------|--------------------------|
| Total Petroleum Hydrocarbons | 66.3 | 39.5 |

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: Rosa Unit #145D


Analyst


Review



EPA METHOD 418.1
TOTAL PETROLEUM
HYDROCARBONS
QUALITY ASSURANCE REPORT

| | | | |
|--------------------|-----------------------|------------------|----------|
| Client: | QA/QC | Project #: | N/A |
| Sample ID: | QA/QC | Date Reported: | 08-18-10 |
| Laboratory Number: | 08-18-TPH QA/QC 55574 | Date Sampled: | N/A |
| Sample Matrix: | Freon-113 | Date Analyzed: | 08-18-10 |
| Preservative: | N/A | Date Extracted: | 08-18-10 |
| Condition: | N/A | Analysis Needed: | TPH |

| | | | | | | |
|--------------------|------------|------------|-----------|-----------|--------------|---------------|
| Calibration | I-Cal Date | C-Cal Date | I-Cal RF: | C-Cal RF: | % Difference | Accept. Range |
| | 07-29-10 | 08-18-10 | 1,860 | 1,770 | 4.8% | +/- 10% |

| | | |
|----------------------------|---------------|-----------------|
| Blank Conc. (mg/Kg) | Concentration | Detection Limit |
| TPH | ND | 39.5 |

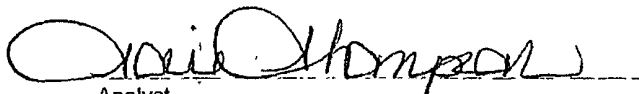
| | | | | |
|--------------------------------|--------|-----------|--------------|---------------|
| Duplicate Conc. (mg/Kg) | Sample | Duplicate | % Difference | Accept. Range |
| TPH | 66.3 | 67.7 | 2.1% | +/- 30% |

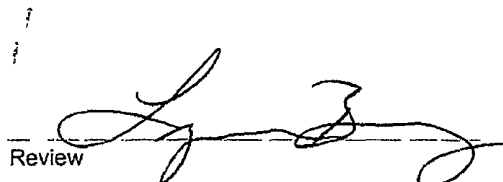
| | | | | | |
|----------------------------|--------|-------------|--------------|------------|--------------|
| Spike Conc. (mg/Kg) | Sample | Spike Added | Spike Result | % Recovery | Accept Range |
| TPH | 66.3 | 2,000 | 2,010 | 97.3% | 80 - 120% |

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 55574-55576


Analyst


Review



envirotech
Analytical Laboratory

Chloride

| | | | |
|----------------|-------------|-------------------|------------|
| Client: | WPX | Project #: | 04108-0136 |
| Sample ID: | Reserve Pit | Date Reported: | 08-18-10 |
| Lab ID#: | 55574 | Date Sampled: | 08-13-10 |
| Sample Matrix: | Soil | Date Received: | 08-16-10 |
| Preservative: | Cool | Date Analyzed: | 08-17-10 |
| Condition: | Intact | Chain of Custody: | 10196 |


| Parameter | Concentration (mg/Kg) |
|-----------|-----------------------|
|-----------|-----------------------|

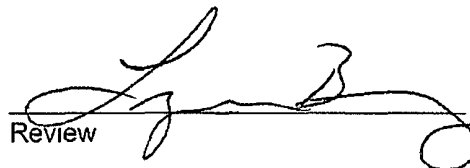
Total Chloride

35

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: **Rosa Unit #145D**


Analyst


Review

CHAIN OF CUSTODY RECORD

10196

| Client: WPX | | | Project Name / Location: Rosa unit #145D | | | ANALYSIS / PARAMETERS | | | | | | | | | | | | | | | |
|--|-------------|-------------|--|---------------------------|--------------------------|---------------------------------------|---|-------------------|--------------------|-------------------|---------------|-----------------|-----------------|---------------|-----|-------------|----------|--|--|-------------|---------------|
| Client Address: Myke Lane | | | Sampler Name: Johnny Stinson | | | | | | | | | | | | | | | | | | |
| Client Phone No.: | | | Client No.: 04108-0136 | | | | | | | | | | | | | | | | | | |
| Sample No./ Identification | Sample Date | Sample Time | Lab No. | Sample Matrix | No./Volume of Containers | Preservative HgCl 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 | 8.13.10 | 1:30 PM | 55574 | Soil Solid Sludge Aqueous | 1 | | | ✓ | ✓ | | | | | | | ✓ | ✓ | | | Y | Y |
| | | | | Soil Solid Sludge Aqueous | | | | | | | | | | | | | | | | | |
| | | | | Soil Solid Sludge Aqueous | | | | | | | | | | | | | | | | | |
| | | | | Soil Solid Sludge Aqueous | | | | | | | | | | | | | | | | | |
| | | | | Soil Solid Sludge Aqueous | | | | | | | | | | | | | | | | | |
| | | | | Soil Solid Sludge Aqueous | | | | | | | | | | | | | | | | | |
| | | | | Soil Solid Sludge Aqueous | | | | | | | | | | | | | | | | | |
| | | | | Soil Solid Sludge Aqueous | | | | | | | | | | | | | | | | | |
| | | | | Soil Solid Sludge Aqueous | | | | | | | | | | | | | | | | | |
| | | | | Soil Solid Sludge Aqueous | | | | | | | | | | | | | | | | | |
| | | | | Soil Solid Sludge Aqueous | | | | | | | | | | | | | | | | | |
| | | | | Soil Solid Sludge Aqueous | | | | | | | | | | | | | | | | | |
| Relinquished by: (Signature) <i>[Signature]</i> | | | | | Date 8-16-10 | Time 10:10 AM | Received by: (Signature) <i>Randi Vaguer</i> | | | | | Date 8-16-10 | Time 10:15 a | | | | | | | | |
| 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: Tuesday, November 02, 2010 9:55 AM
To: Fields, Vanessa
Subject: FW: Williams cleanups, Rosa Unit 145D

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

From: Glenn Shelby [mailto:glenn@adobecontractorsinc.com]
Sent: Monday, August 02, 2010 9:37 AM
To: Brandon Powell
Cc: Vanessa Fields; Myke Lane; Tasha Meador; Johnny Stinson
Subject: Williams cleanups, Rosa Unit 145D

On August 4th we will move equipment to the Rosa Unit 145D and start backfilling the reserve pit. If you have any questions call me.

Thanks,
Glenn Shelby
Field Foreman
Adobe Contractors, Inc
Cell 320-7187
glenn@adobecontractorsinc.com

Fields, Vanessa

From: Glenn Shelby [glenn@adobecontractorsinc.com]
Sent: Monday, August 02, 2010 9:35 AM
To: Mark Kelly, Bill Liess; Bob Switzer, Randy Mckee; Sherrie Landon; Fields, Vanessa
Cc: Johnny Stinson, Fields, Vanessa, Meador, Tasha; Lane, Myke
Subject: Williams cleanups, Rosa Unit 145D

On August 4th we will move equipment to the Rosa Unit 145D and start backfilling the reserve pit. If you have any questions call me.

Thanks,
Glenn Shelby
Field Foreman
Adobe Contractors, Inc
Cell: 320-7187
glenn@adobecontractorsinc.com

Meador, Tasha

From: Glenn Shelby [glenn@adobecontractorsinc.com]
Sent: Monday, August 02, 2010 9:35 AM
To: Mark Kelly; Bill Liess; Bob Switzer, Randy Mckee, Sherrie Landon; Fields, Vanessa
Cc: Johnny Stinson; Fields, Vanessa; Meador, Tasha; Lane, Myke
Subject: Williams cleanups, Rosa Unit 145D

On August 4th we will move equipment to the Rosa Unit 145D and start backfilling the reserve pit. If you have any questions call me.

Thanks,
Glenn Shelby
Field Foreman
Adobe Contractors, Inc.
Cell: 320-7187
glenn@adobecontractorsinc.com

8/2/2010

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN
DUPLICATE

(See other instructions on
reverse side)

FORM APPROVED
OMB NO 1004-0137
Expires February 28, 1995

| | | | | | | | |
|--|---------------------------|---|------------------------|--|---|--|------------------------|
| 5 LEASE DESIGNATION AND LEASE NO NMSF-078766 | | | | | | | |
| 6 IF INDIAN, ALLOTTEE OR | | | | | | | |
| 7 UNIT AGREEMENT NAME Rosa Unit | | | | | | | |
| 8 FARM OR LEASE NAME, WELL NO Rosa Unit #145D | | | | | | | |
| 9 API WELL NO 30-045-35002 | | | | | | | |
| 10 FIELD AND POOL, OR WILDCAT Basin Dakota | | | | | | | |
| 11 SEC T R M OR BLOCK AND SURVEY OR AREA Sec 16, T31N, R6W | | | | | | | |
| 12 COUNTY OR San Juan | | | | | | | |
| 13 STATE New Mexico | | | | | | | |
| 14 PERMIT NO | | | | | | | |
| DATE ISSUED | | | | | | | |
| 15 DATE SPUDDED 9-17-09 | | | | | | | |
| 16 DATE TD REACHED 9-29-09 | | | | | | | |
| 17 DATE COMPLETED (READY TO PRODUCE) 11-5-09 | | | | | | | |
| 18 ELEVATIONS (DK, RKB RT GR ETC)* 6324' GR | | | | | | | |
| 19 ELEVATION CASINGHEAD | | | | | | | |
| 20 TOTAL DEPTH MD & TVD 8261' MD / 8013' TVD | | | | | | | |
| 21 PLUG BACK TD, MD & TVD 8257' MD / 8009' TVD | | | | | | | |
| 22 IF MULTI-COMP, HOW MANY 3* | | | | | | | |
| 23 INTERVALS DRILLED BY | | | | | | | |
| 24 PRODUCING INTERVAL(S) OF THIS COMPLETION - TOP BOTTOM, NAME (MD AND TVD)* BASIN DAKOTA 8098'-8235' MD | | | | | | | |
| 25 WAS DIRECTIONAL SURVEY MADE YES | | | | | | | |
| 26 TYPE ELECTRIC AND OTHER LOGS RUN Array Induction, Compensated Gamma Ray-Density-Neutron, Ultra Sonic Gas Detector and CBL | | | | | | | |
| 27 WAS WELL CORED No | | | | | | | |
| 28 CASING REPORT (Report all strings set in well) | | | | | | | |
| CASING SIZE/GRADE | | WEIGHT LB/FT | DEPTH SET (MD) | HOLE SIZE | TOP OF CEMENT CEMENTING RECORD | AMOUNT PULLED | |
| 10-3/4", J-55 | | 40.5# | 312' | 14-3/4" | 290 SX - SURFACE | | |
| 7-5/8", K-55 | | 26.4# | 4060' | 9-7/8" | 625 SX - SURFACE | | |
| 4-1/2", N-80 | | 11.60# | 8260' | 6-3/4" | 570 SX - 4010' (CBL) | | |
| 29 LINER RECORD | | | | | | | |
| SIZE | TOP (MD) | BOTTOM (MD) | SACKS CEMENT* | SCREEN (MD) | SIZE | DEPTH SET (MD) | PACKER SET (MD) |
| | | | | | 2 3/5", 4 7/8", J-55 & N-80 EUE 8id | 8165' | none |
| 31 PERFORATION RECORD (Interval size and number) Dakota Total of 69, 0 3/4" holes | | | | 32 ACID SHOT FRACTURE CEMENT SQUEEZE ETC | | | |
| | | | | DEPTH INTERVAL (MD) | | AMOUNT AND KIND OF MATERIAL USED | |
| | | | | 8098'-8235' | | Fraced with 6076# 100 mesh BASF followed with 120,743# 40/70 mesh BASF | |
| | | | | | | | |
| 33 PRODUCTION | | | | | | | |
| DATE OF FIRST PRODUCTION | | PRODUCTION METHOD (Flowing gas lift pumping-size and type of pump) Flowing | | | WELL STATUS (PRODUCING OR SI) SI - waiting on tie-in | | |
| DATE OF TEST 11-5-09 | TESTED 2 hr | CHOKE SIZE 1/2" | PROD'N FOR TEST PERIOD | OIL - BBL | GAS - MCF | WATER - BBL | GAS-OIL RATIO |
| FLOW TBG PRESS 0 | CASING PRESSURE 580 lb | CALCULATED 24-HOUR RATE | | OIL - BBL | GAS - MCF 834 mcf/d | WATER - BBL | OIL GRAVITY-API (CORR) |
| 34 DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TO BE SOLD | | | | | | TEST WITNESSED BY Craig Ward | |
| 35 LIST OF ATTACHMENTS SUMMARY OF POROUS ZONES, WELLBORE DIAGRAM, Directional EOW report | | | | | | | |
| 36 I hereby certify that the foregoing and attached information is complete and correct as determined from all available records | | | | | | | |

SIGNED _____ TITLE Drlg COM DATE 11-6-09

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN
DUPLICATE

(See other instructions on
reverse side)

FORM APPROVED
OMB NO 1004-0137
Expires February 28, 1995

| | | | | | | | |
|--|-----------------------------------|--|------------------------|--|--|--|------------------------|
| WELL COMPLETION OR RECOMPLETION REPORT AND LOG* | | | | | | 5 LEASE DESIGNATION AND LEASE NO NMSF-078766 | |
| | | | | | | 6 IF INDIAN ALLOTTEE OR | |
| 1a TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL DRY OTHER | | | | | | 7 UNIT AGREEMENT NAME Rosa Unit | |
| b TYPE OF COMPLETION <input checked="" type="checkbox"/> NEW WELL WORKOVER DEEPEN PLUG BACK DIFF RESVR OTHER | | | | | | | |
| 2 NAME OF OPERATOR WILLIAMS PRODUCTION COMPANY | | | | | | 8 FARM OR LEASE NAME, WELL NO Rosa Unit #145D | |
| 3 ADDRESS AND TELEPHONE NO P O Box 640, Aztec, NM 87410 (505) 634-4208 | | | | | | 9 API WELL NO 30-045-35002 | |
| 4 LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At Surface 610' FNL & 610' FEL, sec 16, T31N, R6W At top production interval reported below 1768' FNL & 392' FEL, sec 16, T31N, R6W At total depth Same | | | | | | 10 FIELD AND POOL, OR WILDCAT Basin Mancos | |
| | | | | | | 11 SECTION OR BLOCK AND SURVEY OR AREA Sec 16, T31N, R6W | |
| | | | | | | 12 COUNTY OR San Juan | 13 STATE New Mexico |
| 15 DATE SPUDDED 9-17-09 | 16 DATE TTD REACHED 9-29-09 | 17 DATE COMPLETED (READY TO PRODUCE) 11-5-09 | | 18 ELEVATIONS (DK RKB, RT GR ETC)* 6324' GR | | 19 ELEVATION CASINGHEAD | |
| 20 TOTAL DEPTH MD & TVD 8261' MD / 8013' TVD | | 21 PLUG BACK TD MD & TVD 8257' MD / 8009' TVD | | 22 IF MULTICOMP HOW MANY 3* | 23 INTERVALS DRILLED BY | 24 ROYALTY TOOLS x | CABLE TOOLS |
| 24 PRODUCING INTERVAL(S), OF THIS COMPLETION - TOP, BOTTOM NAME (MD AND TVD)* BASIN MANCOS 6990'-7486' MD | | | | | | 25 WAS DIRECTIONAL SURVEY MADE YES | |
| 26 TYPE ELECTRIC AND OTHER LOGS RUN Array Induction, Compensated Gamma Ray-Density-Neutron, Ultra Sonic Gas Detector and CBL | | | | | | 27 WAS WELL CORED No | |
| 28 CASING REPORT (Report all strings set in well) | | | | | | | |
| CASING SIZE/GRADE | | WEIGHT LB/FT | DEPTH SET (MD) | HOLE SIZE | TOP OF CEMENT, CEMENTING RECORD | | AMOUNT PULLED |
| 10-3/4", J-55 | | 40 5# | 312' | 14-3/4" | 290 SX - SURFACE | | |
| 7-5/8", K-55 | | 26 4# | 4060' | 9-7/8" | 625 SX - SURFACE | | |
| 4-1/2", N-80 | | 11 6 0# | 8260 | 6-3/4" | 570 SX - 4010' (CBL) | | |
| 29 LINER RECORD | | | | | | | |
| SIZE | TOP (MD) | BOTTOM (MD) | SACKS CEMENT* | SCREEN (MD) | SIZE | DEPTH SET (MD) | PACKER SET (MD) |
| | | | | | 2 3/5", 4 7#, J-55 & N-80 EUE 8id | 8165' | none |
| 31 PERFORATION RECORD (Interval size and number) | | | | 32 ACID SHOT, FRACTURE CEMENT SQUEEZE ETC | | | |
| | | | | DEPTH INTERVAL (MD) | AMOUNT AND KIND OF MATERIAL USED | | |
| <u>Upper MC</u> Total of 75, 0 3/4" holes | | | | 6990'-7230' | Fraced with 4925# 100 mesh BASF followed with 101,090# 40/70 mesh BASF | | |
| <u>Lower MC</u> Total of 66, 0 3/4" holes | | | | 7334'-7486' | Fraced with 5049# 100 mesh BASF followed with 76,729# 40/70 mesh BASF | | |
| 33 PRODUCTION Commingled with MV and DK per AZT-3278 NSL-6013 | | | | | | | |
| DATE OF FIRST PRODUCTION | | PRODUCTION METHOD (Flowing gas lift pumping-size and type of pump) | | | | WELL STATUS (PRODUCING OR SI) | |
| | | Flowing | | | | SI - waiting on tie-in | |
| DATE OF TEST | TESTED | CHOKE SIZE | PROD'N FOR TEST PERIOD | OIL - BBL | GAS - MCF | WATER - BBL | GAS-OIL RATIO |
| 11-5-09 | 2 hr | 1/2" | | | | | |
| FLOW I BG PRESS | CASING PRESSURE | CALCULATED 24-HOUR RATE | | OIL - BBL | GAS - MCF | WATER - BBL | OIL GRAVITY-API (CORR) |
| 0 | 580 lb | | | | 1285 mcf/d | | |
| 34 DISPOSITION OF GAS (Sold, used for fuel, vented, etc) TO BE SOLD | | | | | | TEST WITNESSED BY Craig Ward | |
| 35 LIST OF ATTACHMENTS SUMMARY OF POROUS ZONES WELLBORE DIAGRAM, Directional EOW report | | | | | | | |
| 36 I hereby certify that the foregoing and attached information is complete and correct as determined from all available records | | | | | | | |

SIGNED _____ TITLE Drlg COM DATE 11-6-09

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN
DUPLICATE

(See other instructions on
reverse side)

FORM APPROVED
OMB NO 1004-0137
Expires February 28, 1995

| | | | | | | | |
|--|--|---|------------------------|--|-------------------------------------|--|-------------------------------|
| WELL COMPLETION OR RECOMPLETION REPORT AND LOG* | | | | | | 5 LEASE DESIGNATION AND LEASE NO NMSF-078766 | |
| 1a TYPE OF WELL <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER | | | | | | 6 IF INDIAN ALLOTTEE OR | |
| b TYPE OF COMPLETION <input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF RESVR <input type="checkbox"/> OTHER | | | | | | 7 UNIT AGREEMENT NAME Rosa Unit | |
| 2 NAME OF OPERATOR WILLIAMS PRODUCTION COMPANY | | | | | | 8 FARM OR LEASE NAME, WELL NO Rosa Unit #145D | |
| 3 ADDRESS AND TELEPHONE NO P O Box 640, Aztec, NM 87410 (505) 634-4208 | | | | | | 9 API WELL NO 30-045-35002 | |
| 4 LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At Surface 610' FNL & 610' FEL, sec 16, T31N, R6W At top production interval reported below 1768' FNL & 392' FEL, sec 16, T31N, R6W At total depth Same | | | | | | 10 FIELD AND POOL, OR WILDCAT Blanco Mesaverde | |
| | | | | | | 11 SEC T R M OR BLOCK AND SURVEY OR AREA Sec 16, T31N, R6W | |
| | | | | | | 12 COUNTY OR San Juan | 13 STATE New Mexico |
| 15 DATE SPUDDED 9-17-09 | 16 DATE T D REACHED 9-29-09 | 17 DATE COMPLETED (READY TO PRODUCE) 11-5-09 | | 18 ELEVATIONS (DK RKB RT GR ETC)* 6324' GR | | 19 ELEVATION CASINGHEAD | |
| 20 TOTAL DEPTH MD & TVD 8261' MD / 8013 TVD | | 21 PLUG BACK T D MD & TVD 8257' MD / 8009' TVD | | 22 IF MULTICOMP HOW MANY 3 * | 23 INTERVALS DRILLED BY | ROTARY TOOLS x | CABLE TOOLS |
| 24 PRODUCING INTERVAL(S), OF THIS COMPLETION - TOP BOTTOM NAME (MD AND TVD)* BLANCO MESAVERDE 5590'-6174' MD | | | | | | 25 WAS DIRECTIONAL SURVEY MADE YES | |
| 26 TYPE ELECTRIC AND OTHER LOGS RUN Aray Induction, Compensated Gamma Ray-Density-Neutron, Ultra Sonic Gas Detector and CBL | | | | | | 27 WAS WELL CORED No | |
| 28 CASING REPORT (Report all strings set in well) | | | | | | | |
| CASING SIZE/GRADE | | WEIGHT LB/FT | DEPTH SET (MD) | HOLE SIZE | TOP OF CEMENT CEMENTING RECORD | | AMOUNT PULLED |
| 10-3/4", J-55 | | 40 5# | 312' | 14-3/4" | 290 SX - SURFACE | | |
| 7-5/8", K-55 | | 26 4# | 4060' | 9-7/8" | 625 SX - SURFACE | | |
| 4-1/2", N-80 | | 11 6 0# | 8260' | 6-3/4' | 570 SX - 4010' (CBL) | | |
| 29 LINER RECORD | | | | | | | |
| SIZE | TOP (MD) | BOTTOM (MD) | SACKS CEMENT* | SCREEN (MD) | SIZE | DEPTH SET (MD) | PACKER SET (MD) |
| | | | | | 2 3/5", 4 7#, J-55 & N-80 EUE 8rd | 8165' | none |
| 31 PERFORATION RECORD (Interval size and number) | | | | 32 ACID SHOT FRACTURE CEMENT SQUEEZE ETC | | | |
| | | | | DEPTH INTERVAL (MD) | AMOUNT AND KIND OF MATERIAL USED | | |
| <u>Upper MV</u> Total of 55, 0 3/4" holes | | | | 5590'-5822' | Fraced with 80,700# 20/40 mesh BASF | | |
| <u>Lower MV</u> Total of 48, 0 3/4" holes | | | | 5854'-6174' | Fraced with 79,500# 20/40 mesh BASF | | |
| 33 PRODUCTION Commingled with MC and DK per AZT-3278 NSL-6013 | | | | | | | |
| DATE OF FIRST PRODUCTION | | PRODUCTION METHOD (Flowing gas lift, pumping-size and type of pump) | | | | WELL STATUS (PRODUCING OR SI) | |
| | | Flowing | | | | SI - waiting on tie-in | |
| DATE OF TEST | TESTED | CHOKE SIZE | PROD'N FOR TEST PERIOD | OIL - BBL | GAS - MCF | WATER - BBL | GAS-OIL RATIO |
| 11-5-09 | 2 hr | 1/2" | | | | | |
| FLOW TBG PRESS | CASING PRESSURE | CALCULATED 24-HOUR RATE | | OIL - BBL | GAS - MCF | WATER - BBL | OIL GRAVITY-API (CORR) |
| 0 | 580 lb | | | | 1354 mcf/d | | |
| 34 DISPOSITION OF GAS (Sold used for fuel vented etc) TO BE SOLD | | | | | | TEST WITNESSED BY Craig Ward | |
| 35 LIST OF ATTACHMENTS SUMMARY OF POROUS ZONES, WELLBORE DIAGRAM Directional EOW report | | | | | | | |
| 36 I hereby certify that the foregoing and attached information is complete and correct as determined from all available records | | | | | | | |
| SIGNED _____ | | | | TITLE DrIng COM DATE 11-6-09 | | | |

The Williams logo, featuring the word "Williams" in a bold, italicized serif font, with a stylized swoosh or underline element below it.

The logo for William's, featuring the brand name in a bold, italicized serif font, with a stylized swoosh underline.

The logo for William's, featuring the brand name in a bold, italicized serif font, with a stylized swoosh underline.



William's™

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: Rosa 145D | API #:30-045-35002 |
|--------------------------|--------------------|

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

| | | |
|--|---|-------------------------------------|
| Pit Liner intact (no visible tears) | Yes <input type="checkbox"/> No <input type="checkbox"/> If No, Report to EH&S immediately | Date / Time Reported:8/6/10 9:50 |
| Pit Properly Fenced (no fence on rig side if on site) | Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Adequate freeboard (liquid level 2 vertical feet from berm top) | Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Flare Pit free of liquids | Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit is in the process of being closed | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 8/6/10 Phone: (505)947-4974 | | |

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: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|---|--|--------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported: 1/8/10 9:45 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 1/8/10 Phone: (505)947-4974 | | |

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: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|---|--|--------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:1/15/10 9:55 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 1/15/10 Phone: (505)947-4974 | | |

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: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|---|--|--------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:1/22/10 9:40 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 1/22/10 Phone: (505)947-4974 | | |

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: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|---|--|--------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:1/28/10 9:40 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 1/28/10 Phone: (505)947-4974 | | |

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

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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: Rosa 145D

API #:30-045-35002

Pit Type: X Drilling ☐ Workover ☐ Cavitation Inspection: ☐ Daily (Rig) X Weekly (Tech)

| | | |
|---|--|-------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:2/5/10 9:35 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 2/5/10 Phone: (505)947-4974 | | |

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

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Temporary Pit Inspection

FACILITY INFORMATION

| | |
|---------------------------------|----------------------------|
| Facility Name: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|---|--|---------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported: 2/12/10 9:45 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 2/12/10 Phone: (505)947-4974 | | |

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: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

| | |
|---|---|
| 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) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported: 2/19/10 9:25 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 2/19/10 Phone: (505)947-4974 | | |

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

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Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa 145D

API #:30-045-35002

Pit Type: ☒ Drilling ☐ Workover ☐ Cavitation Inspection: ☐ Daily (Rig) ☒ Weekly (Tech)

| | | |
|---|--|--------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:2/26/10 9:50 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 2/26/10 Phone: (505)947-4974 | | |

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File: EH&S Well Files

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Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa 145D

API #:30-045-35002

Pit Type: ☒ Drilling ☐ Workover ☐ Cavitation Inspection: ☐ Daily (Rig) ☒ Weekly (Tech)

| | | |
|---|--|-------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:3/5/10 9:50 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 3/5/10 Phone: (505)947-4974 | | |

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

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Temporary Pit Inspection

FACILITY INFORMATION

| | |
|---------------------------------|----------------------------|
| Facility Name: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|---|--|--------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:3/11/10 9:50 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 3/11/10 Phone: (505)947-4974 | | |

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

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Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa 145D

API #:30-045-35002

Pit Type: ☒ Drilling ☐ Workover ☐ Cavitation Inspection: ☐ Daily (Rig) ☒ Weekly (Tech)

| | | |
|---|--|--------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:3/18/10 9:50 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes <input checked="" type="checkbox"/> No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 3/18/10 Phone: (505)947-4974 | | |

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File: EH&S Well Files

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Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa 145D

API #:30-045-35002

Pit Type: X Drilling ☐ Workover ☐ Cavitation Inspection: ☐ Daily (Rig) X Weekly (Tech)

| | | |
|---|--|---------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:3/26/10 11:55 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 3/26/10 Phone: (505)947-4974 | | |

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

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Temporary Pit Inspection

FACILITY INFORMATION

| | |
|---------------------------------|----------------------------|
| Facility Name: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

| | |
|---|---|
| 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) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:4/16/10 9:35 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 4/16/10 Phone: (505)947-4974 | | |

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
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Temporary Pit Inspection

FACILITY INFORMATION

| | |
|---------------------------------|----------------------------|
| Facility Name: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

| | |
|---|---|
| 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) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:4/9/10 9:40 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 4/9/10 Phone: (505)947-4974 | | |

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

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Aztec, NM 87410
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Temporary Pit Inspection

FACILITY INFORMATION

| | |
|---------------------------------|----------------------------|
| Facility Name: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|--|--|--------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:4/29/10 9:30 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 vertical feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 4/29/10 Phone: (505)947-4974 | | |

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

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Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa 145D

API #:30-045-35002

Pit Type: X Drilling ☐ Workover ☐ Cavitation Inspection: ☐ Daily (Rig) X Weekly (Tech)

| | | |
|---|--|-------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:4/1/10 9:30 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 4/1/10 Phone: (505)947-4974 | | |

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

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Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa 145D

API #:30-045-35002

Pit Type: X Drilling ☐ Workover ☐ Cavitation Inspection: ☐ Daily (Rig) X Weekly (Tech)

| | | |
|--|--|--------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:4/23/10 9:25 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 vertical feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 4/23/10 Phone: (505)947-4974 | | |

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

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Temporary Pit Inspection

FACILITY INFORMATION

| | |
|---------------------------------|----------------------------|
| Facility Name: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|---|--|-------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:7/2/10 9:25 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 7/2/10 Phone: (505)947-4974 | | |

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Temporary Pit Inspection

FACILITY INFORMATION

| | |
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| Facility Name: Rosa 145D | API #:30-045-35002 |
|--------------------------|--------------------|

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

| | | |
|---|--|-------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:7/9/10 9:35 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 7/9/10 Phone: (505)947-4974 | | |

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Temporary Pit Inspection

FACILITY INFORMATION

| | |
|---------------------------------|----------------------------|
| Facility Name: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|---|--|--------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:7/12/10 9:30 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 7/12/10 Phone: (505)947-4974 | | |

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Temporary Pit Inspection

FACILITY INFORMATION

| | |
|---------------------------------|----------------------------|
| Facility Name: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|---|--|--------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:7/29/10 9:20 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 7/29/10 Phone: (505)947-4974 | | |

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: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|---|--|--------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:7/23/10 9:15 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
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| Inspector Signature: DARREN ROWLEY | | |
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Temporary Pit Inspection

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|---|---|

| | | |
|---|--|---------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:12/4/09 11:45 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
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| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 12/4/09 Phone: (505)947-4974 | | |

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Temporary Pit Inspection

FACILITY INFORMATION

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|---------------------------------|----------------------------|
| Facility Name: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|--|--|--|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:12/11/09 11:45 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 vertical feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
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| Title: Tech | | |
| Date: 12/11/09 Phone: (505)947-4974 | | |

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

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720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

| | |
|---------------------------------|----------------------------|
| Facility Name: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|---|--|--|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported: 12/17/09 1:45 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
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| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 12/17/09 Phone: (505)947-4974 | | |

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File: EH&S Well Files

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Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

| | |
|---------------------------------|----------------------------|
| Facility Name: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|---|--|--|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:12/31/09 11:30 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 12/31/09 Phone: (505)947-4974 | | |

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: Rosa 145D | API #: 30-045-35002 |
|---------------------------------|----------------------------|

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

| | | |
|---|--|---------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:8/28/09 11:45 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 8/28/09 Phone: (505)947-4974 | | |

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: Rosa 145D

API #:30-045-35002

Pit Type: ☒ Drilling ☐ Workover ☐ Cavitation Inspection: ☐ Daily (Rig) ☒ Weekly (Tech)

| | | |
|---|--|--------------------------------------|
| Pit Liner intact (no visible tears) | X Yes <input type="checkbox"/> No If No, Report to EH&S immediately | Date / Time Reported:9/4/09 11:45 |
| Pit Properly Fenced (no fence on rig side if on site) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced) | |
| Pit Slopes intact | X Yes <input type="checkbox"/> No | |
| Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top) | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Free oil or sheen present on pit | Yes X No | |
| Flare Pit free of liquids | X Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Comments: Pit looks good | | |
| Inspector Signature: DARREN ROWLEY | | |
| Printed Name: Darren Rowley | | |
| Title: Tech | | |
| Date: 9/4/09 Phone: (505)947-4974 | | |

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

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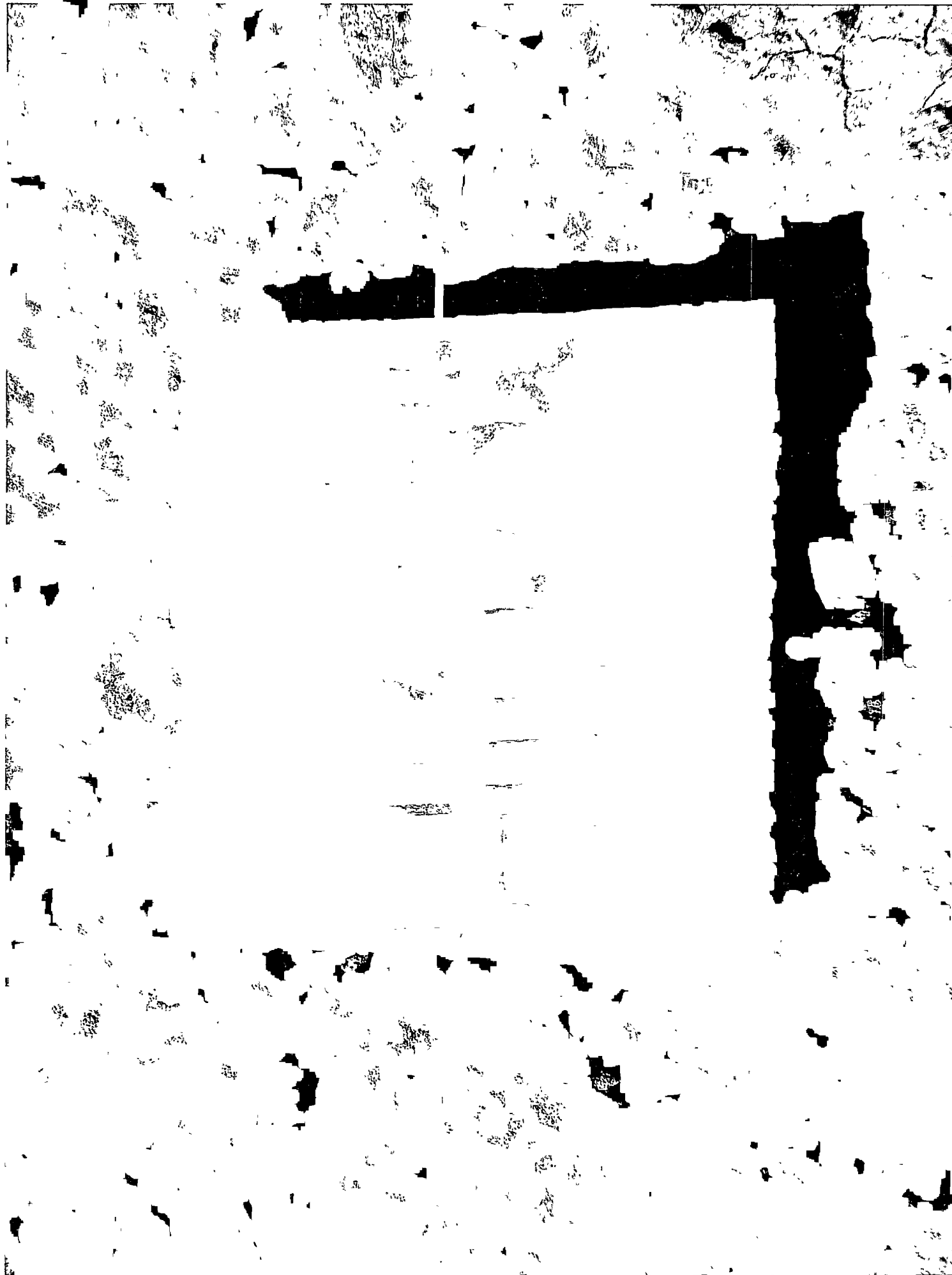
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Exploration & Production
PO Box 640
Aztec, NM 87410
505/634-4219
505/634-4205 fax



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 # 7085

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:

| | | | | | | | |
|--|----------------------|---|------------------------|---|------------------------------------|---|--|
| 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 30-039-35002 | | | | | |
| | | 2. Type of Lease <input type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> FED/INDIAN | | | | | |
| | | 3. State Oil & Gas Lease No SF-078766 | | | | | |
| 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 Rosa | | | |
| | | | | 6. Well Number Rosa Unit #145D | | | |
| 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 | | | | | | | |
| 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 | |
| Surface: | | | | | | | |
| BH: | | | | | | | |
| 13. Date Spudded | 14. Date T D Reached | 15. Date Rig Released 11/05/2009 | | 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 | | AMOUNT PULLED | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 24. LINER RECORD | | | 25. TUBING RECORD | | | | |
| SIZE | TOPED | BOTTOM | SACKS CEMENT | SCREEN | SIZE | DEPTH 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 (Flowing, gas lift pumping - Size and type pump) | | | Well Status (Prod or Shut-in) | | |
| Date of Test | Hours Tested | Choke Size | Prod'n For Test Period | Oil - Bbl | Gas - MCF | Water - Bbl | |
| | | | | | | | |
| Flow Tubing Press | Casing Pressure | Calculated 24-Hour Rate | Oil - Bbl | Gas - MCF | Water - Bbl | Oil Gravity - API - (Corr) | |
| | | | | | | | |
| 29. Disposition of Gas (Sold, used for fuel, vented, etc) | | | | | 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 90516 Longitude 107 46127 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 <u>Tasha Meador</u> | | | | Title Permit Technician Date <u>8/29/11</u> | | | |
| E-mail Address tasha.meador@williams.com | | | | | | | |

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 & Natural Resources Department

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised October 12, 2005
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 30-045-35002 | *Pool Code 97232 / 72319 / 71599 | *Pool Name BASIN MANCOS / BLANCO MESAVERDE / BASIN DAKOTA |
| *Property Code 17033 | *Property Name ROSA UNIT | *Well Number 145D |
| *GRID No 120782 | *Operator Name WILLIAMS PRODUCTION COMPANY | *Elevation 6324' |

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 |
|--------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|----------|
| A | 16 | 31N | 6W | | 610 | NORTH | 610 | EAST | 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 |
|--------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|----------|
| H | 16 | 31N | 6W | | 1768 | NORTH | 392 | EAST | SAN JUAN |

| | | | |
|--|-------------------------------|----------------------------------|------------------------|
| ¹² Dedicated Acres 320.0 Acres - (N/2) | ¹³ Joint or Infill | ¹⁴ Consolidation Code | ¹⁵ Order No |
|--|-------------------------------|----------------------------------|------------------------|

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

| | | |
|---|---|---|
| ¹⁶ 2638.68' LEASE SF-078766 | SURFACE LOCATION LAT: 36.90516°N LONG: 107.46127°W DATUM: NAD1983 | SURFACE LOCATION LAT: 36.90516°N LONG: 107.46127°W DATUM: NAD1983 |
| | BOTTOM-HOLE LAT: 36.90197°N LONG: 107.46052°W DATUM: NAD1983 | |
| LOT 1 | LOT 2 | LOT 3 |
| LEASE 16 STATE E-346 | | |
| TRACT 40 | | |
| TRACT 39 | | |
| 5280.00' | | |

¹⁷ OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom-hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Tasha Meador 8/29/11
Signature Date

Tasha Meador
Printed Name

¹⁸ SURVEYOR CERTIFICATION

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.

Date Revised: OCTOBER 13, 2009
Date of Survey: JUNE 1, 2009

Signature and Seal of Professional Surveyor

JASON C. EDWARDS
Certificate Number 15269