

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED

FORM APPROVED  
OMB No 1004-0137  
Expires July 31, 2010

MAY 26 2009

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

5 Lease Serial No.  
NMSF- 078769

6 If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE** - Other instructions on page 2.

7. If Unit of CA/Agreement, Name and/or No  
ROSA UNIT

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.  
ROSA UNIT #189

2. Name of Operator  
WILLIAMS PRODUCTION CO., LLC

9. API Well No.  
30-039-30186

3a Address  
P. O BOX 640  
AZTEC, NM 87410

3b Phone No (include area code)  
(505) 634-4208

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

4. Location of Well (Footage, Sec, T, R, M, or Survey Description)  
1455 FNL & 1780 FEL  
Sec 21, T31N, R5W

11. Country or Parish, State  
RIO ARRIBA, NEW MEXICO

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Surface Casing</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13 Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection )

5/21/09- TD- 14 3/4" SURF HOLE @ 320', 0730 HRS

RAN 7 JT'S, 10-3/4", J-55, 40.5#, ST&C, CSG SET @ 312'  
PUMP SINGLE SLURRY CMT JOB AS FOLLOWS. PRESS TEST LINES TO 1500#, 10 BBL FW SPACER, 290sx (521 cuft) OF TYPE III CMT + 2% CAL-SEAL 60 + 1/4# POLY-E-FLAKE/sx + 0.3% VERSASET + 2% ECONOLITE + 6% SALT ( YEILD = 1.796 cuft/sk, WT = 13.5#/gal ) CIRC 30 BBLS GOOD CMT TO PIT, PLUG DN @ 2:42 PM 5/21/09

5/22/09- INSTALL TEST PLUG & TEST ANNULAR PREVENTER WOULD NOT TEST (AWS TO SEND NEW RUBBER & TECH TO REPAIR) TEST BLIND RAMS, INNER & OUTER CHOKE MANIFOLD VALVES, INNER & OUTER KILL LINE VALVES, INNER & OUTER CHOKE LINE VALVES & 4.5 TIW FLOOR VALVE @ 250# LOW FOR 5 MIN EACH & 1500# HIGH FOR 10 MIN EACH. PULL TEST PLUG & TEST 10-3/4" CSG AGAINST BLIND RAMS @ 1500# FOR 30 MIN. ( ALL TESTS GOOD ) RE INSTALL TEST PLUG & TEST ANNULAR PREVENTER @ 250# LOW FOR 5 MIN & 1500# FOR 10 MIN ( TEST GOOD ) TEST KELLY, UPPER KELLY VALVE & STAND PIPE VALVE @ 250# LOW FOR 5 MIN EACH & 1500# HIGH FOR 10 MIN ( ALL TESTS GOOD ) TEST PUMP & CHART RECORDER USED ON ALL TESTS

BOP TEST WITNESSED BY VIRGIL LUCERO W/ BLM

RCVD MAY 29 '09  
OIL CONS. DIV.  
DIST. 3

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)

Larry Higgins

Title Drilling COM

Signature *Larry Higgins*

Date 05/26/2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE **ACCEPTED FOR RECORD**

Approved by

Title

Date

MAY 27 2009

Conditions of approval, if any, are attached Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon

Office

**FARMINGTON FIELD OFFICE**  
BY *[Signature]*

Title 18 U.S.C Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

NMOCD *[Signature]*