

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use
"APPLICATION FOR PERMIT--" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	8. Well Name and No. ROSA UNIT #206
2. Name of Operator WILLIAMS PRODUCTION COMPANY	9. API Well No. 300392424000
3. Address and Telephone No. PO BOX 3102 MS 37-4, TULSA, OK 74101 (918) 561-6181	10. Field and Pool, or Exploratory Area BASIN FRUITLAND COAL
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1190' FNL 1050' FEL NWNE, SEC. 24, T31N, R6W	11. County or Parish, State RIO ARRIBA, NEW MEXICO

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>CONTINUE SHUT-IN</u> <u>STATUS</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water
	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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

Williams Production Company requests continued shut-in status for 6 months on the above referenced Rosa Unit well. This well was recently acquired from Meridian and the additional time is needed to evaluate it.

THIS APPROVAL EXPIRES JAN 31 1996

RECEIVED
JAN 30 1996
OIL CON. DIV.
DIST. 3

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

Signed Kris Russell Title Production Analyst Date January 22, 1996

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: _____

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

*See Instruction on Reverse Side

APPROVED

JAN 26 1996

Dr. [Signature]

NAK:CD