Form 3160-5
(June 1990)

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

5. Lease Designation and Serial No.
SF-078765

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation
Rosa Unit 17033

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

8. Well Name and No.
#15A

2. Name of Operator
WILLIAMS PRODUCTION COMPANY 120782

9. API Well No.
30-039-25525

3. Address and Telephone No. c/o Walsh Engr. & Prod. Corp.
7415 E. Main Farmington, New Mexico 87402 505 327-4892

10. Field and Pool, or Exploratory Area
BASIN DAKOTA 71599
BLANCO MESA VERDE 72319

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1790'FSL & 820'FEL
Section 29, T31N, R5W Unit J

11. County or Parish, State
Rio Arriba Co, N.M.

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

TYPE OF SUBMISSION	TYPE OF ACTION	
☒ Notice of Intent	☐ Abandonment	☐ Change of Plans
☒ Subsequent Report	☐ Recompletion	☐ New Construction
☐ Final Abandonment Notice	☐ Plugging Back	☐ Non-Routine Fracturing
	☐ Casing Repair	☐ Water Shut-Off
	☐ Altering Casing	☐ Conversion to Injection
	☒ Other See Below	☐ 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.)*

Due to hole problems, the 5-1/2" production casing will be set at a depth of 6150'.

The 3-1/2" liner will be run from 8175' to 6050'.

RECEIVED
JUL 20 1995
OIL CON. DIV.
DIST. 3

14. I hereby certify that the foregoing is true and correct
Signed Paul C. Thompson Title Paul C. Thompson, Agent APPROVED AS AMENDED Date 7/13/95

(This space for Federal or State office use)

Approved by _____ Title _____ JUL 13 1995
Conditions of approval, if any:

NMOCD for Chip Harraden DISTRICT MANAGER