

UNITED STATES  
DEPARTMENT OF INTERIOR  
BUREAU OF LAND MANAGEMENT

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

SUNDRY NOTICE AND REPORTS ON WELLS

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

- 5. Lease Designation and Serial No.  
SF-078765
- 6. If Indian, Allottee or Tribe Name
- 7. If Unit or CA, Agreement Designation  
ROSA UNIT
- 8. Well Name and No.  
ROSA UNIT COM #60A
- 9. API Well No.  
30-045-29799
- 10. Field and Pool, or Exploratory Area  
BLANCO MESA VERDE
- 11. County or Parish, State  
SAN JUAN, NM

SUBMIT IN TRIPLICATE

RECEIVED  
OCT - 4 1999  
OIL CON. DIV.  
DIST. 3

- 1. Type of Well  
 Oil Well  Gas Well  Other
- 2. Name of Operator  
WILLIAMS PRODUCTION COMPANY
- 3. Address and Telephone No.  
PO BOX 3102 MS 37-2, TULSA, OK 74101 (918) 573-6254
- 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
350' FSL & 1920' FEL, SW/4 SE/4 SEC 4-T31N-R6W

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 checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other <u>SPUD WELL</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.)\*

This well was spudded 1800 hrs 9-24-1999.

APD/ROW

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

Signed Tracy Ross Title Production Analyst Date September 28, 1999  
Tracy Ross

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any:

ACCEPTED FOR RECORD

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.

NMOCD

OCT 01 1999  
FARMINGTON FIELD OFFICE  
BY B. M.