

Submit 3 Copies
To Appropriate
District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

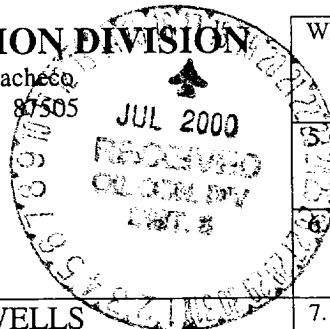
DISTRICT II
811 South First, Artesia NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

2040 South Pacheco
Santa Fe, NM 87505



Form C-103
Revised 1-1-89

WELL API NO. 30-039-26304	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No. 120782	
7. Lease Name or Unit Agreement Name: ROSA UNIT	
8. Well No. 129	
9. Pool name or Wildcat BLANCO MV	

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator WILLIAMS PRODUCTION COMPANY	
3. Address of Operator P O BOX 3102, MS 37-2, TULSA, OK 74101	
4. Well Location (Surface) Unit letter <u>K</u> : 1700 feet from the <u>SOUTH</u> line & 2010 feet from the <u>WEST</u> line Sec 34-32N-06W RIO ARRIBA, NM	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 6357' GR	

Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL
WORK

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASING

TEMPORARILY ABANDON

CHANGE PLANS

COMMENCE DRILLING OPNS.

PLUG AND
ABANDONMENT

PULL OR ALTER CASING

CASING TEST AND CEMENT JOB

OTHER:

OTHER: CHANGE WELL NAME

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103.

Williams Production Company proposes to change the lease name on the above well from the Rosa Unit #129 to the Rosa Unit Com #129 17212

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Tracy Ross TITLE: PRODUCTION ANALYST DATE: July 13, 2000

Type or print name TRACY ROSS Telephone No: (918) 573-6254
(This space for State use)

APPROVED Original Signed by STEVEN N. HAYDEN DEPUTY OIL & GAS INSPECTOR, DIST. #1 JUL 21 2000
BY _____ TITLE _____ DATE _____

Conditions of approval, if any: