Submit 3 Copies To Appropri	ate District	State of 1	New Me	xico		Form C-103
Office District I	Energy, Minerals and Natural Resources					March 4, 2004
1625 N. French Dr., Hobbs, NM 88240					WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSER			VATION DIVISION h St. Francis Dr.		3004532745	
					5. Indicate Type	;
1000 Río Brazos Rd., Aztec, NM 87410					STATE 6. State Oil & Ga	
District IV 1220 S. St. Francis Dr., Santa	Fe. NM	Suitare	, 1111 0	303	SF-078765	is Lease No.
87505						
(DO NOT USE THIS FORM	FOR PROPOS	CES AND REPORTS ON ALS TO DRILL OR TO DEEF ATION FOR PERMIT" (FORM	EN OR E	OG BACK TO A	7. Lease Name o Rosa Unit	r Unit Agreement Name
1. Type of Well:	s Well X (Other	E a	JAN 2005	8. Well Nu 156B	mber
2. Name of Operator					9. OGRID Numb	ner
Williams Production Co	mpany	الم المراجعة		Dr. J	120782	
3. Address of Operator			Eng.	c.y		ne or Wildcat
PO BOX 3102 Tulsa, C	K 74101	•	Territoria.		Blanco MV/I	Basin Dakota
4. Well Location			A COM	6819		
Unit Letter J: 1660 feet from the South line and 2625 feet from the East line						
Section	9	Township	31N Ran	ge 6W	NMPM	County San Juan
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6386' GR Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)						
						Success
Pit Location: UL_Sect TwpRngPit type Production Depth to Groundwater >50 feet Distance from nearest fresh water >1000 ft						
Distance from nearest surface water <1000 feet Below-grade Tank Location UL_JSect_9_Twp_31N_Rng_6W;						
GPS: Long: - Lat						
L						
12.	Check A	ppropriate Box to In	dicate N	ature of Notice,	Report or Other	Data
		TENTION TO:			SEQUENT RE	
		PLUG AND ABANDON		REMEDIAL WORK		ALTERING CASING 🔲
TEMPORARILY ABANE	OON [CHANGE PLANS		COMMENCE DRII	LLING OPNS.	PLUG AND
DULL OF ALTER OACH		MU TIDI E	_		_	ABANDONMENT
PULL OR ALTER CASII	NG ∐	MULTIPLE COMPLETION	L	CASING TEST AN CEMENT JOB	ID 📙	
OTHER:		<u> </u>		OTHER:		
13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. Production Below grade tank to be located approximately 50 feet from well head. BGT to be constructed, operated and closed in accordance with NMOCD guidelines and Williams procedures.						
						•
<u> </u>						
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines X, a general permit X or an (attached) alternative OCD-approved plan .						
SIGNATURE		X One	TITLE	EH&S Specialist	DATE_V	24/05
Type or print name <u>N</u>	lichael K. L	ane E-mail address	: myke	.lane@williams.com	Telephone No	o. 970-563-3319
(This space for State use))					

APPPROVED BY Conditions of approval, if any:

DATE JAN 25 ZU05