

District I
1625 N French Dr, Hobbs, NM 88240
District II
1301 W Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S St Francis Dr, Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources
Department
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-144
July 21, 2008

For temporary pits, closed-loop systems, and below-grade tanks, submit to the appropriate NMOCD District Office.
For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.

4603

Pit, Closed-Loop System, Below-Grade Tank, or
Proposed Alternative Method Permit or Closure Plan Application

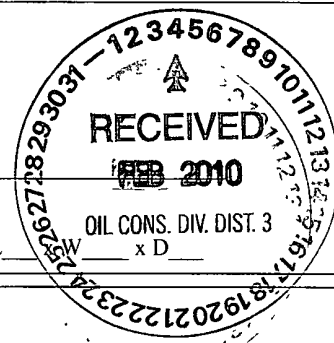
- Type of action: ☐ Permit of a pit, closed-loop system, below-grade tank, or proposed alternative method
☒ Closure of a pit, closed-loop system, below-grade tank, or proposed alternative method
☐ Modification to an existing permit
☐ Closure plan only submitted for an existing permitted or non-permitted pit, closed-loop system, below-grade tank, or proposed alternative method

Instructions: Please submit one application (Form C-144) per individual pit, closed-loop system, below-grade tank or alternative request

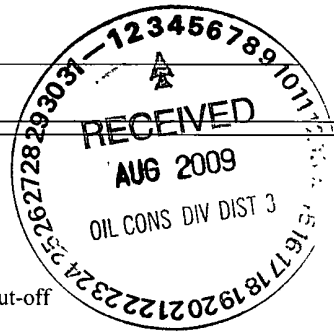
Please be advised that approval of this request does not relieve the operator of liability should operations result in pollution of surface water, ground water or the environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances.

1
Operator Williams Operating Co, LLC OGRID #: 120782
Address PO Box 640 / 721 S Main Aztec, NM 87410
Facility or well name: Rosa Unit 380
API Number 3003927491 OCD Permit Number: _____
U/L or Qtr/Qtr L Section 20 Township 31N Range 4W County: Rio Arriba
Center of Proposed Design: Latitude 36.88485 \ Longitude -107.284359 NAD: ☐ 1927 ☒ 1983
Surface Owner: ☒ Federal ☐ State ☐ Private ☐ Tribal Trust or Indian Allotment

2.
☒ **Pit:** Subsection F or G of 19.15.17.11 NMAC
Temporary: ☒ Drilling ☐ Workover
☐ Permanent ☐ Emergency ☐ Cavitation ☐ P&A
☒ Lined ☐ Unlined Liner type: Thickness _____ mil ☐ LLDPE ☐ HDPE ☐ PVC ☐ Other _____
☐ String-Reinforced
Liner Seams: ☐ Welded ☒ Factory ☐ Other _____ Volume: _____ bbl Dimensions: L _____ x D _____



3
☐ **Closed-loop System:** Subsection H of 19.15.17.11 NMAC
Type of Operation: ☐ P&A ☐ Drilling a new well ☐ Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent)
☐ Drying Pad ☐ Above Ground Steel Tanks ☐ Haul-off Bins ☐ Other _____
☐ Lined ☐ Unlined Liner type: Thickness _____ mil ☐ LLDPE ☐ HDPE ☐ PVC ☐ Other _____
Liner Seams: ☐ Welded ☐ Factory ☐ Other _____



4.
☐ **Below-grade tank:** Subsection I of 19.15.17.11 NMAC
Volume: _____ bbl Type of fluid _____
Tank Construction material: _____
☐ Secondary containment with leak detection ☐ Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off
☐ Visible sidewalls and liner ☐ Visible sidewalls only ☐ Other _____
Liner type: Thickness _____ mil ☐ HDPE ☐ PVC ☐ Other _____

5.
☐ **Alternative Method:**
Submittal of an exception request is required Exceptions must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.

60

6.

Fencing: Subsection D of 19.15.17.11 NMAC (*Applies to permanent pits, temporary pits, and below-grade tanks*)

☐ Chain link, six feet in height, two strands of barbed wire at top (*Required if located within 1000 feet of a permanent residence, school, hospital, institution or church*)

☐ Four foot height, four strands of barbed wire evenly spaced between one and four feet

☒ Alternate Please specify PER BLM SPECS

7.

Netting: Subsection E of 19.15.17.11 NMAC (*Applies to permanent pits and permanent open top tanks*)

☒ Screen ☐ Netting ☐ Other _____

☐ Monthly inspections (If netting or screening is not physically feasible)

8.

Signs: Subsection C of 19.15.17.11 NMAC

☐ 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers

☒ Signed in compliance with 19.15.3.103 NMAC

9.

Administrative Approvals and Exceptions:

Justifications and/or demonstrations of equivalency are required Please refer to 19.15.17 NMAC for guidance

Please check a box if one or more of the following is requested, if not leave blank:

☒ Administrative approval(s) Requests must be submitted to the appropriate division district or the Santa Fe Environmental Bureau office for consideration of approval.

☐ Exception(s) Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.

10.

Siting Criteria (regarding permitting): 19.15.17.10 NMAC

Instructions: The applicant must demonstrate compliance for each siting criteria below in the application. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to drying pads or above-grade tanks associated with a closed-loop system.

Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank.

- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells

☐ Yes ☐ No

Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).

- Topographic map, Visual inspection (certification) of the proposed site

☐ Yes ☐ No

Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (*Applies to temporary, emergency, or cavitation pits and below-grade tanks*)

- Visual inspection (certification) of the proposed site, Aerial photo; Satellite image

☐ Yes ☐ No
☐ NA

Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (*Applies to permanent pits*)

- Visual inspection (certification) of the proposed site; Aerial photo; Satellite image

☐ Yes ☐ No
☐ NA

Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application.

- NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site

☐ Yes ☐ No

Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended.

- Written confirmation or verification from the municipality; Written approval obtained from the municipality

☐ Yes ☐ No

Within 500 feet of a wetland.

- US Fish and Wildlife Wetland Identification map, Topographic map; Visual inspection (certification) of the proposed site

☐ Yes ☐ No

Within the area overlying a subsurface mine.

- Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division

☐ Yes ☐ No

Within an unstable area.

- Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS, NM Geological Society, Topographic map

☐ Yes ☐ No

Within a 100-year floodplain.

- FEMA map

☐ Yes ☐ No

11

Temporary Pits, Emergency Pits, and Below-grade Tanks Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC**Instructions:** Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.

- ☐ Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC
- ☐ Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.9 NMAC
- ☐ Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC
- ☐ Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC
- ☐ Closure Plan (Please complete Boxes 14 through 18, if applicable) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC

☒ Previously Approved Design (attach copy of design) API Number: _____ or Permit Number: _____

12.

Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC**Instructions:** Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.

- ☐ Geologic and Hydrogeologic Data (only for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of 19.15.17.9 NMAC
- ☐ Siting Criteria Compliance Demonstrations (only for on-site closure) - based upon the appropriate requirements of 19.15.17.10 NMAC
- ☐ Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC
- ☐ Closure Plan (Please complete Boxes 14 through 18, if applicable) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC

☐ Previously Approved Design (attach copy of design) API Number: _____

☐ Previously Approved Operating and Maintenance Plan API Number: _____ (Applies only to closed-loop system that use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

13.

Permanent Pits Permit Application Checklist: Subsection B of 19.15.17.9 NMAC**Instructions:** Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.

- ☐ Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19.15.17.9 NMAC
- ☐ Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC
- ☐ Climatological Factors Assessment
- ☐ Certified Engineering Design Plans - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Dike Protection and Structural Integrity Design - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Leak Detection Design - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Liner Specifications and Compatibility Assessment - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Quality Control/Quality Assurance Construction and Installation Plan
- ☐ Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC
- ☐ Freeboard and Overtopping Prevention Plan - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Nuisance or Hazardous Odors, including H₂S, Prevention Plan
- ☐ Emergency Response Plan
- ☐ Oil Field Waste Stream Characterization
- ☐ Monitoring and Inspection Plan
- ☐ Erosion Control Plan
- ☐ Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC

14.

Proposed Closure: 19.15.17.13 NMAC**Instructions:** Please complete the applicable boxes, Boxes 14 through 18, in regards to the proposed closure plan.

Type: ☒ Drilling ☐ Workover ☐ Emergency ☐ Cavitation ☐ P&A ☐ Permanent Pit ☒ Below-grade Tank ☐ Closed-loop System

☐ Alternative

Proposed Closure Method: ☐ Waste Excavation and Removal

☐ Waste Removal (Closed-loop systems only)

☒ On-site Closure Method (Only for temporary pits and closed-loop systems)

☒ In-place Burial ☐ On-site Trench Burial

☐ Alternative Closure Method (Exceptions must be submitted to the Santa Fe Environmental Bureau for consideration)

15.

Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) **Instructions:** Each of the following items must be attached to the closure plan. Please indicate, by a check mark in the box, that the documents WILL BE attached WITH CLOSURE REPORT.

- ☒ Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC
- ☒ Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC
- ☒ Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings)
- ☒ Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC
- ☒ Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC
- ☒ Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

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Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC)

Instructions: Please identify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than two facilities are required.

* Disposal Facility Name: _____ Disposal Facility Permit Number: _____
 Disposal Facility Name: _____ Disposal Facility Permit Number: _____

Will any of the proposed closed-loop system operations and associated activities occur on or in areas that *will not* be used for future service and operations?

☐ Yes (If yes, please provide the information below) ☐ No

Required for impacted areas which will not be used for future service and operations

- ☐ Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC
☐ Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19 15 17 13 NMAC
☐ Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

17

Siting Criteria (regarding on-site closure methods only): 19.15.17 10 NMAC

Instructions: Each siting criteria requires a demonstration of compliance in the closure plan. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17.10 NMAC for guidance.

- | | |
|---|---|
| Ground water is less than 50 feet below the bottom of the buried waste.
- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells | <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> NA |
| Ground water is between 50 and 100 feet below the bottom of the buried waste
- NM Office of the State Engineer - iWATERS database search, USGS; Data obtained from nearby wells | <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> NA |
| Ground water is more than 100 feet below the bottom of the buried waste
- NM Office of the State Engineer - iWATERS database search, USGS; Data obtained from nearby wells | <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> NA |
| Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark)
- Topographic map; Visual inspection (certification) of the proposed site | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application
- Visual inspection (certification) of the proposed site; Aerial photo; Satellite image | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application.
- NM Office of the State Engineer - iWATERS database, Visual inspection (certification) of the proposed site | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended.
- Written confirmation or verification from the municipality; Written approval obtained from the municipality | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Within 500 feet of a wetland
- US Fish and Wildlife Wetland Identification map; Topographic map, Visual inspection (certification) of the proposed site | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Within the area overlying a subsurface mine.
- Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Within an unstable area
- Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources, USGS; NM Geological Society; Topographic map | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Within a 100-year floodplain.
- FEMA map | <input type="checkbox"/> Yes <input type="checkbox"/> No |

18.

On-Site Closure Plan Checklist: (19 15 17 13 NMAC) **Instructions:** Each of the following items must be attached to the closure plan. Please indicate, by a check mark in the box, that the documents are attached.

- ☒ Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC
☒ Proof of Surface Owner Notice - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC
☐ Construction/Design Plan of Burial Trench (if applicable) based upon the appropriate requirements of 19.15 17 11 NMAC
☒ Construction/Design Plan of Temporary Pit (for in-place burial of a drying pad) - based upon the appropriate requirements of 19.15.17.11 NMAC
☒ Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC
☒ Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC
☒ Waste Material Sampling Plan - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC
☒ Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings or in case on-site closure standards cannot be achieved)
☒ Soil Cover Design - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC
☒ Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19 15 17 13 NMAC
☒ Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19 15 17 13 NMAC

19.

Operator Application Certification:

I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.

Name (Print): _____ Title _____

Signature _____ Date: _____

e-mail address _____ Telephone: _____

20.

OCD Approval: ☐ Permit Application (including closure plan) ☒ Closure Plan (only) ☐ OCD Conditions (see attachment)

OCD Representative Signature: James D. Kelly Approval Date: 6/08/2012
Deputy Oil & Gas Inspector,
Title: District #3 OCD Permit Number: _____

21.

Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC

Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not complete this section of the form until an approved closure plan has been obtained and the closure activities have been completed.

☒ Closure Completion Date: 5/29/2009

22.

Closure Method:

☐ Waste Excavation and Removal ☒ On-Site Closure Method ☐ Alternative Closure Method ☐ Waste Removal (Closed-loop systems only)
☐ If different from approved plan, please explain.

23.

Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:

Instructions: Please identify the facility or facilities for where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more than two facilities were utilized.

Disposal Facility Name: _____ Disposal Facility Permit Number: _____

Disposal Facility Name: _____ Disposal Facility Permit Number: _____

Were the closed-loop system operations and associated activities performed on or in areas that *will not* be used for future service and operations?

☐ Yes (If yes, please demonstrate compliance to the items below) ☐ No

Required for impacted areas which will not be used for future service and operations

- ☐ Site Reclamation (Photo Documentation)
☐ Soil Backfilling and Cover Installation
☐ Re-vegetation Application Rates and Seeding Technique

24.

Closure Report Attachment Checklist: *Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached.*

- ☒ Proof of Closure Notice (surface owner and division)
☒ Proof of Deed Notice (required for on-site closure)
☒ Plot Plan (for on-site closures and temporary pits)
☐ Confirmation Sampling Analytical Results (if applicable)
☒ Waste Material Sampling Analytical Results (required for on-site closure)
☒ Disposal Facility Name and Permit Number
☒ Soil Backfilling and Cover Installation
☒ Re-vegetation Application Rates and Seeding Technique
☒ Site Reclamation (Photo Documentation)

On-site Closure Location: Latitude 36.88485 Longitude -107.284359 NAD. ☐ 1927 ☒ 1983

25.

Operator Closure Certification:

I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.

Name (Print): Michael K Lane Title: EH&S Specialist

Signature: Natasha Meade in absence of mylan Date: 11/29/09

e-mail address: myke.lane@williams.com Telephone: 505-634-4219

**Williams Production Co., LLC
San Juan Basin: New Mexico Assets**

Meador, Tasha

From: johnny@adobecontractorsinc.com
Sent: Wednesday, May 27, 2009 9:32 AM
To: Brandon Powell
Cc: JJ Miller; Lane, Myke ; Meador, Tasha
Subject: Williams clean-ups

Brandon,
We are finished with the clean-up on the Rosa Unit #380. We will move to the Rosa unit #361A today and start it on Friday. Let me know if you have any questions.

Thanks,

Johnny Stinson
Gen. Manager/ Adobe Contractors
Office: (505)632-1486
Mobile: (505)320-6076
johnny@adobecontractorsinc.com

7/20/2009



STATE OF NEW MEXICO:

COUNTY OF RIO ARRIBA:

RECORDATION NOTICE OF PIT BURIAL

In accordance with Section 19.15.17.13.F.1.f of the NMAC, operator hereby provides notice in the public record of an on-site burial of a temporary pit at the following location:

Well Name:	<u>Rosa Unit #380</u>
Latitude (DDD MM.MMM'):	<u>-107.284359</u>
Longitude (DDD MM.MMM'):	<u>36.88485</u>
Unit Letter (1/4, 1/4):	<u>L</u>
Section:	<u>20</u>
Township:	<u>T31N</u>
Range:	<u>R04W</u>
County:	<u>RIO ARRIBA</u>
State:	<u>NEW MEXICO</u>

IN WITNESS WHEREOF, this Recordation Notice of Pit Burial has been executed on the date indicated below by the undersigned.

WILLIAMS COMPANIES, INC.

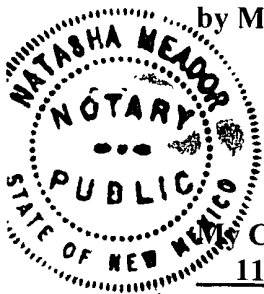
Michael K. Lane EH&S Specialist

7/14/09

Date

STATE OF NEW MEXICO
COUNTY OF SAN JUAN

This document was acknowledged before me on this 14 day of July 2009
by Michael K Lane, EH&S Specialist of WILLIAMS COMPANIES, INC.

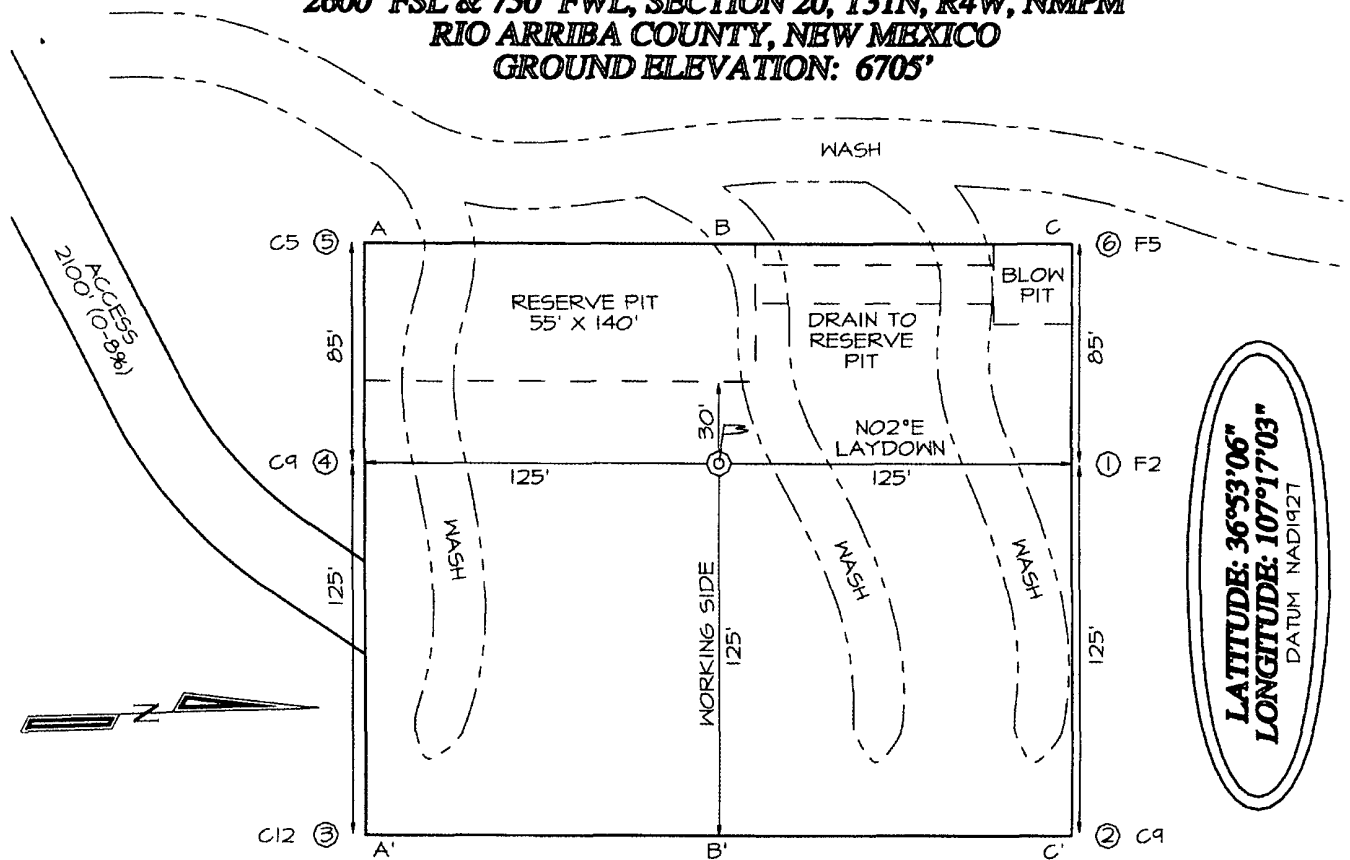


Notary Public Signature

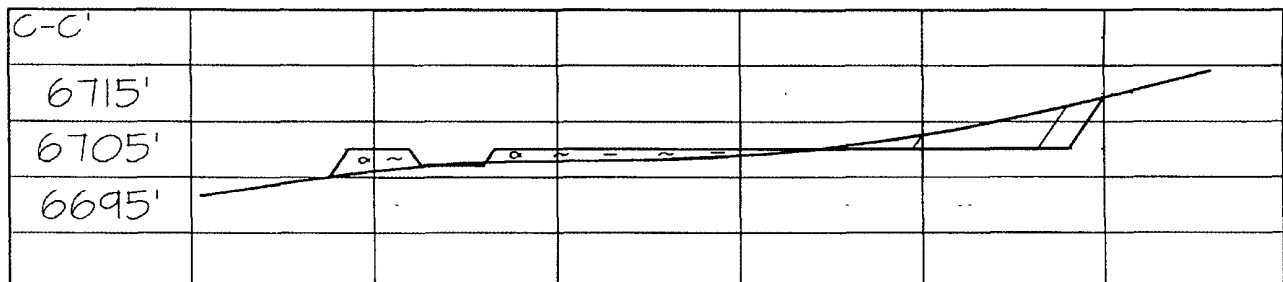
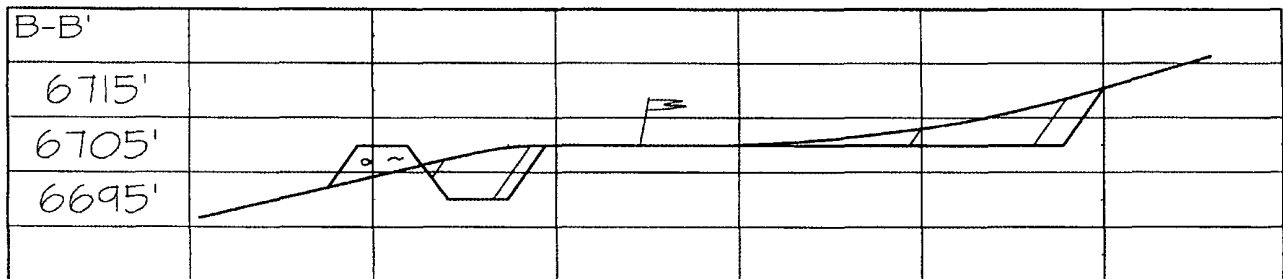
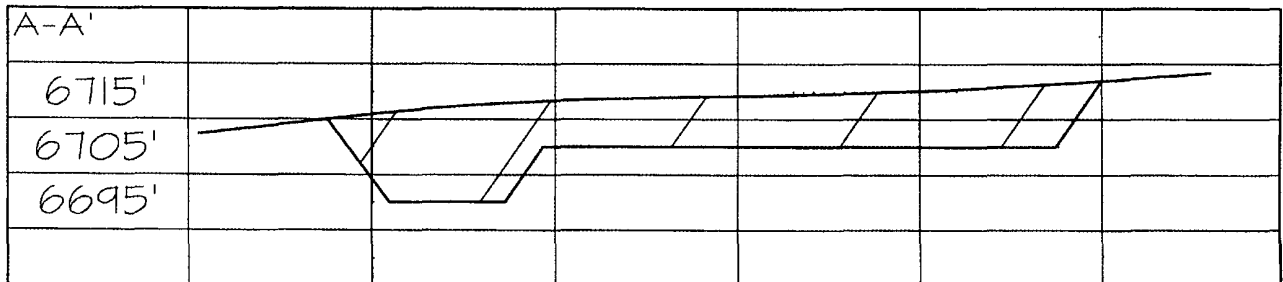
Commission Expires
11/30/2011

NATASHA MEADOR
Notary Name Printed

WILLIAMS PRODUCTION COMPANY ROSA UNIT #380
2600' FSL & 750' FWL, SECTION 20, T31N, R4W, NMPM
RIO ARriba COUNTY, NEW MEXICO
GROUND ELEVATION: 6705'



LATITUDE: 36°53'06"
LONGITUDE: 107°17'03"
 DATUM NAD1927





**EPA METHOD 8015 Modified
Nonhalogenated Volatile Organics
Total Petroleum Hydrocarbons**

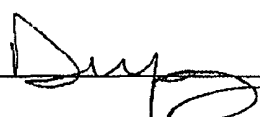
Client:	Williams	Project #:	04108-0003
Sample ID:	Post Closure Reserve Pit	Date Reported:	06-02-09
Laboratory Number:	50305	Date Sampled:	05-27-09
Chain of Custody No:	7148	Date Received:	05-29-09
Sample Matrix:	Soil	Date Extracted:	05-29-09
Preservative:	Cool	Date Analyzed:	06-01-09
Condition:	Intact	Analysis Requested:	8015 TPH

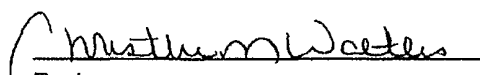
Parameter	Concentration (mg/Kg)	Det. Limit (mg/Kg)
Gasoline Range (C5 - C10)	1.3	0.2
Diesel Range (C10 - C28)	5.5	0.1
Total Petroleum Hydrocarbons	6.8	0.2

ND - Parameter not detected at the stated detection limit.

References: Method 8015B, Nonhalogenated Volatile Organics, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.

Comments: **Rosa Unit #380**


Analyst


Review



EPA Method 8015 Modified
Nonhalogenated Volatile Organics
Total Petroleum Hydrocarbons

Quality Assurance Report

Client:	QA/QC	Project #:	N/A
Sample ID:	06-01-09 QA/QC	Date Reported:	06-02-09
Laboratory Number	50284	Date Sampled	N/A
Sample Matrix:	Methylene Chloride	Date Received:	N/A
Preservative	N/A	Date Analyzed:	06-01-09
Condition:	N/A	Analysis Requested:	TPH

	Cal Date	Cal R	C-Cal RE	% Difference	Accept Range
Gasoline Range C5 - C10	05-07-07	9.2243E+002	9.2280E+002	0.04%	0 - 15%
Diesel Range C10 - C28	05-07-07	9.3947E+002	9.3985E+002	0.04%	0 - 15%

Blank Conc. (mg/L - mg/Kg)	Concentration	Detection Limit
Gasoline Range C5 - C10	ND	0.2
Diesel Range C10 - C28	ND	0.1
Total Petroleum Hydrocarbons	ND	0.2

Duplicate Conc. (mg/Kg)	Sample	Duplicate	% Difference	Accept Range
Gasoline Range C5 - C10	ND	ND	0.0%	0 - 30%
Diesel Range C10 - C28	ND	ND	0.0%	0 - 30%

Spike Conc. (mg/Kg)	Sample	Spike Added	Spike Result	% Recovery	Accept Range
Gasoline Range C5 - C10	ND	250	237	94.8%	75 - 125%
Diesel Range C10 - C28	ND	250	238	95.2%	75 - 125%

ND - Parameter not detected at the stated detection limit.

References: Method 8015B, Nonhalogenated Volatile Organics, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.

Comments: QA/QC for Samples 50284 - 50286, 50289 - 50293, and 50305.

Analyst

Review



EPA METHOD 8021
AROMATIC VOLATILE ORGANICS

Client:	Williams	Project #:	04108-0003
Sample ID:	Post Closure Reserve Pit	Date Reported:	06-02-09
Laboratory Number:	50305	Date Sampled:	05-27-09
Chain of Custody:	7148	Date Received:	05-29-09
Sample Matrix:	Soil	Date Analyzed:	06-01-09
Preservative:	Cool	Date Extracted:	05-29-09
Condition:	Intact	Analysis Requested:	BTEX

Parameter	Concentration (ug/Kg)	Det. Limit (ug/Kg)
Benzene	ND	0.9
Toluene	ND	1.0
Ethylbenzene	ND	1.0
p,m-Xylene	ND	1.2
o-Xylene	ND	0.9
Total BTEX	ND	

ND - Parameter not detected at the stated detection limit.

Surrogate Recoveries:	Parameter	Percent Recovery
	Fluorobenzene	96.0 %
	1,4-difluorobenzene	96.0 %
	Bromochlorobenzene	96.0 %

References: Method 5030B, Purge-and-Trap, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996

Method 8021B, Aromatic Volatile Organics, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.

Comments: Rosa Unit #380

Analyst

Review



EPA METHOD 8021
AROMATIC VOLATILE ORGANICS

Client:	N/A	Project #	N/A
Sample ID:	06-01-BT QA/QC	Date Reported:	06-02-09
Laboratory Number:	50284	Date Sampled:	N/A
Sample Matrix:	Soil	Date Received:	N/A
Preservative:	N/A	Date Analyzed:	06-01-09
Condition:	N/A	Analysis:	BTEX

Calibration and Detection Limits (ug/L)	1-Cal/RF	6-Cal/RF	%Diff	Blank Conc.	Detect Limit
		Accept. Range 0 - 15%			
Benzene	5.0647E+006	5.0749E+006	0.2%	ND	0.1
Toluene	4.9170E+006	4.9269E+006	0.2%	ND	0.1
Ethylbenzene	4.4833E+006	4.4923E+006	0.2%	ND	0.1
p,m-Xylene	1.1401E+007	1.1424E+007	0.2%	ND	0.1
o-Xylene	4.3567E+006	4.3654E+006	0.2%	ND	0.1

Duplicate Conc. (ug/Kg)	Sample	Duplicate	%Diff	Accept Range	Detect Limit
Benzene	2.5	2.4	4.0%	0 - 30%	0.9
Toluene	12.7	12.6	0.8%	0 - 30%	1.0
Ethylbenzene	12.8	14.0	9.4%	0 - 30%	1.0
p,m-Xylene	24.4	25.5	4.5%	0 - 30%	1.2
o-Xylene	11.9	12.2	2.5%	0 - 30%	0.9

Spike Conc. (ug/Kg)	Sample	Amount Spiked	Spiked Sample	% Recovered	Accept Range
Benzene	2.5	50.0	51.7	98.5%	39 - 150
Toluene	12.7	50.0	59.5	94.9%	46 - 148
Ethylbenzene	12.8	50.0	62.4	99.4%	32 - 160
p,m-Xylene	24.4	100	123	98.9%	46 - 148
o-Xylene	11.9	50.0	60.6	97.9%	46 - 148

ND - Parameter not detected at the stated detection limit

References: Method 5030B, Purge-and-Trap, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996
Method 8021B, Aromatic and Halogenated Volatiles by Gas Chromatography Using Photoionization and/or Electrolytic Conductivity Detectors, SW-846, USEPA December 1996

Comments: QA/QC for Samples 50284 - 50286, 50289 - 50293, 50305, and 50306.

Analyst

Review



envirotech
Analytical Laboratory

**EPA METHOD 418.1
TOTAL PETROLEUM
HYDROCARBONS**

Client:	Williams Prod	Project #:	04108-0003
Sample ID:	Post Closure Reserve Pit	Date Reported:	06-03-09
Laboratory Number:	50305	Date Sampled:	05-27-09
Chain of Custody No:	7148	Date Received:	05-29-09
Sample Matrix:	Soil	Date Extracted:	06-01-09
Preservative:	Cool	Date Analyzed:	06-01-09
Condition:	Intact	Analysis Needed:	TPH-418.1

Parameter	Concentration (mg/kg)	Det. Limit (mg/kg)
Total Petroleum Hydrocarbons	26.6	7.1

ND = Parameter not detected at the stated detection limit.

References: Method 418.1, Petroleum Hydrocarbons, Total Recoverable, Chemical Analysis of Water and Waste, USEPA Storet No. 4551, 1978.

Comments: Rosa Unit #380.

Analyst

Review



envirotech
Analytical Laboratory

**EPA METHOD 418.1
TOTAL PETROLEUM
HYDROCARBONS
QUALITY ASSURANCE REPORT**

Client:	QA/QC	Project #:	N/A
Sample ID:	QA/QC	Date Reported:	06-03-09
Laboratory Number:	06-01-TPH,QA/QC 50283	Date Sampled:	N/A
Sample Matrix:	Freon-113	Date Analyzed:	06-01-09
Preservative:	N/A	Date Extracted:	06-01-09
Condition:	N/A	Analysis Needed:	TPH

Calibration	I-Cal Date	C-Cal Date	I-Cal RF	C-Cal RF	% Difference	Accept. Range
	05-26-09	06-01-09	1,480	1,540	4.0%	+/- 10%

Blank Conc. (mg/Kg)	Concentration	Detection Limit
TPH	ND	7.1

Duplicate Conc. (mg/Kg)	Sample	Duplicate	% Difference	Accept. Range
TPH	4,080	3,961	2.9%	+/- 30%

Spike Conc. (mg/Kg)	Sample	Spike Added	Spike Result	% Recovery	Accept Range
TPH	4,080	2,000	5,440	89.5%	80 - 120%

ND = Parameter not detected at the stated detection limit.

References: Method 418.1, Petroleum Hydrocarbons, Total Recoverable, Chemical Analysis of Water and Waste, USEPA Storet No. 4551, 1978.

Comments: QA/QC for Samples 50283, 50290 - 50293 and 50305.

Analyst

Review



envirotech
Analytical Laboratory

Chloride

Client:	Williams Prod	Project #:	04108-0003
Sample ID:	Post Closure Reserve Pit	Date Reported:	06-03-09
Lab ID#:	50305	Date Sampled:	05-27-09
Sample Matrix:	Soil	Date Received:	05-29-09
Preservative:	Cool	Date Analyzed:	06-02-09
Condition:	Intact	Chain of Custody:	7148

Parameter

Concentration (mg/Kg)

Total Chloride

85

Reference: U.S.E.P.A., 4500B, "Methods for Chemical Analysis of Water and Wastes", 1983.
Standard Methods For The Examination of Water And Waste Water", 18th ed., 1992.

Comments: **Rosa Unit #380.**

Analyst

Review

CLOSURE REPORT ATTACHMENTS

Rosa 380

- 1 Date & How free standing liquids removed in following manner: 5/15/2009
Liquids removed by vacuum truck and hauled to Basin Disposal, Permit # NM 01-0005
- 3 Return receipt sent & received from surface owner: Copy Attached
- 4 Rig off location on following date: 5/2/2009
Pit covered on following date: 5/29/2009
Reseeding started/scheduled for following date: Spring Fall 2009
- 6 Pit liner removed on following date: 5/27/2009
Pit liner removed by following company: Adobe Construction
Pit liner removed in following manner: Cut liner above mud level by manually
and/or mechanically cutting liner. Removed all anchored material.
Facility where Pit liner disposed: S.J. Regional Landfill, NMED Permit SWM-052426
- 7 Solidification process accomplished in following manner: Adobe construction
used combination of natural drying & mechanical mixing. Pit contents were mixed with
non-waste, earthen material to a consistency that is safe & stable. The mixing ratio has
not exceeded 3 parts non-waste to 1 part pit contents.
- 8 Five point composite sample provided: Envirotech Results Attached
- 9 Testing of earth by following company: Envirotech, Inc.
Material & method used for solidification, non-waste earthen material:
Grading & backfilling area with approximately 4' of soils and earthen materials recovered during
site construction, to one foot consisting of topsoil.
- 10 Re-contouring to match surrounding geography done in following manner (using BMP's):
Reestablish drainage and contours to approximately match previous topography meeting
Conditions of Approval in APD and as specified by Surface Management Agency Inspectors.
- 11 Sundry (C103) to NMOCD when area 1st seeded: Pending
Seed Mix Used: Seed mix specified in Condition of Approval
- 12 Date pit was covered: 5/29/2009

CLOSURE REPORT ATTACHMENTS

Date 1st seeding took place: Fall following covering of pit

Date 2nd seeding took place: Fall following covering of pit

Date 70% coverage of native perennial vegetation accomplished: To be Determined

Date C103 submitted to NMOCD (stating To be Determined
2 successive vegetative seasons accomplished)

13 Company setting steel marker on site: Adobe Construction

Date marker set: Pending

Type cmt & depth of cmt to place marker: 2 sx Pre-mixed concrete @ 4' depth

Type of marker used: (check one) X Post Plate

Pertinent information on marker (operator, lease, well name/#, S-T-R-UL):

Per Operated Well Information

Does marker state it is an onsite pit burial location? YES

Note: Steel markers not required when closure by waste excavation & removal

Attached information (IF Release Occurred):

****** Sample results from Form C141 (Release Notification & Corrective Action) Attached

Date & time release occurred: N/A

****** C105 (Completion Rpt) w/Applicable Pit Information Attached

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN
DUPLICATE

(See other instructions on
reverse side)

FORM APPROVED
OMB NO 1004-0137
Expires February 28, 1995

5 LEASE DESIGNATION AND LEASE NO
NMSF-078889

6 IF INDIAN, ALLOTTEE OR

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

7 UNIT AGREEMENT NAME

Rosa Unit

8 FARM OR LEASE NAME, WELL NO
Rosa Unit #380

9 API WELL NO
30-039-27491

10 FIELD AND POOL, OR WILDCAT
Basin Fruitland Coal

11 SEC., T., R., M., OR BLOCK AND
SURVEY OR AREA
SEC 20-31N-4W

12 COUNTY OR
Rio Arriba

13 STATE
New Mexico

15 DATE SPURRED
9-18-08

16 DATE T D
REACHED
4-6-09

17 DATE COMPLETED (READY TO PRODUCE)
5-2-09

18 ELEVATIONS (DK, RKB, RT, GR, ETC)*
6705' GR

19 ELEVATION CASINGHEAD

20 TOTAL DEPTH, MD & TVD
3666' MD

21 PLUG, BACK T D, MD & TVD
3666' MD

22 IF MULTICOMP,
HOW MANY

23 INTERVALS
DRILLED BY

ROTARY TOOLS
x

CABLE TOOLS

24 PRODUCING INTERVAL(S), OF THIS COMPLETION - TOP, BOTTOM, NAME (MD AND TVD)*
Basin Fruitland Coal 3505' - 3570'

25 WAS DIRECTIONAL SURVEY MADE
NO

26 TYPE ELECTRIC AND OTHER LOGS RUN
Gamma Ray, Density-Neutron, Compensated Dual Neutron

27 WAS WELL CORED
NO

28 CASING REPORT (Report all strings set in well)

CASING SIZE/GRADE	WEIGHT, LB / FT	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
9-5/8", K-55	36 0#	341'	12-1/4"	150 SX - SURFACE	
7", K-55	23#	3479'	8-3/4"	410 SX - SURFACE	

29 LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
5-1/2", 17# N-80	3376'	3665'	None		2-7/8", 6 5#, J-55	3603'	

31 PERFORATION RECORD (Interval, size, and number)

Basin Fruitland Coal - 4 SPF, 180 holes @ 0 53", 3505' - 3570'

32 ACID, SHOT, FRACTURE CEMENT SQUEEZE, ETC

DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED

Well was not fraced or acidized

33 PRODUCTION

DATE OF FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping-size and type of pump)				WELL STATUS (PRODUCING OR SI)	
		Flowing				SI - waiting on tie in	
DATE OF TEST	TESTED	CHOKE SIZE	PROD'N FOR TEST PERIOD	OIL - BBL	GAS - MCF	WATER - BBL	GAS-OIL RATIO
4-27-09	1 hr	2"					
FLOW TBG PRESS	CASING PRESSURE	CALCULATED 24-HOUR RATE		OIL - BBL	GAS - MCF	WATER - BBL	OIL GRAVITY-API (CORR)
0 oz	64 oz				1236 MCF/D		

34 DISPOSITION OF GAS (Sold, used for fuel, vented, etc) TO BE SOLD

TEST WITNESSED BY Weldon Huggins

35 LIST OF ATTACHMENTS SUMMARY OF POROUS ZONES, WELLBORE DIAGRAM

36 I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED _____ TITLE Drlg COM DATE 5-4-09

District I
1625 N French Dr, Hobbs, NM 88240
District II
1301 W Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S St Francis Dr, Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-141
Revised October 10, 2003

Submit 2 Copies to appropriate
District Office in accordance
with Rule 116 on back
side of form

Release Notification and Corrective Action

OPERATOR

☒ Initial Report ☐ Final Report

Name of Company	WILLIAMS PRODUCTION, LLC	Contact	Myke Lane
Address	P.O. BOX 640, AZTEC, NM 87410	Telephone No.	(505) 634-4219
Facility Name	Rosa Unit #380	Facility Type	Well Location

Surface Owner	Federal	Mineral Owner		Lease No.	
---------------	---------	---------------	--	-----------	--

LOCATION OF RELEASE

Unit Letter	Section	Township	Range	Feet from the	North/South Line	Feet from the	East/West Line	County
L	20	31N	04W					Rio Arriba

Latitude 36.88485 Longitude -107.284359

NATURE OF RELEASE

Type of Release NA	Volume of Release NA	Volume Recovered NA
Source of Release No Release	Date and Hour of Occurrence	Date and Hour of Discovery
Was Immediate Notice Given? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Required	If YES, To Whom?	
By Whom?	Date and Hour	
Was a Watercourse Reached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, Volume Impacting the Watercourse.	

If a Watercourse was Impacted, Describe Fully * No Release

Describe Cause of Problem and Remedial Action Taken *

No action needed

Describe Area Affected and Cleanup Action Taken.*

NA

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.

Signature: <i>Natasha Meadows Absense Myke Lane</i>		OIL CONSERVATION DIVISION	
Printed Name: Michael K. Lane		Approved by District Supervisor:	
Title: EH&S Specialist	Approval Date:	Expiration Date	
E-mail Address: myke.lane@williams.com	Conditions of Approval:		Attached <input type="checkbox"/>
Date: 7/29/09	Phone: (505) 634-4219		

* Attach Additional Sheets If Necessary



05.27.2009

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: ROSA UNIT # 380	API #: 30-038-27491
--------------------------------	---------------------

Pit Type: <input checked="" type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
--	--

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Free oil or sheen present on pit	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature: WILLIE MOCK		
Printed Name: WILLIE MOCK		
Title: DRILLING CONSULTANT (T.D.C.I.)		
Date: 9/28/2008 Phone: (505) 7930528		

Record Retention: Submit with Closure
File: EH&S

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: ROSA UNIT # 380	API #: 30-038-27491
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Pit Type: <input checked="" type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
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Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Free oil or sheen present on pit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Continue to work on cleaning oil out of pits.		
Inspector Signature: WILLIE MOCK		
Printed Name: WILLIE MOCK		
Title: DRILLING CONSULTANT (T.D.C.I.)		
Date: 9/27/2008 Phone: (505) 7930528		

Record Retention: Submit with Closure
File: EH&S

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: ROSA UNIT # 380	API #: 30-038-27491
---------------------------------------	----------------------------

Pit Type: <input checked="" type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
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Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Free oil or sheen present on pit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments: Continue to work on cleaning oil out of pits.		
Inspector Signature: WILLIE MOCK		
Printed Name: WILLIE MOCK		
Title: DRILLING CONSULTANT (T.D.C.I.)		
Date: 9/26/2008 Phone: (505) 7930528		

Record Retention: Submit with Closure
File: EH&S

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: ROSA UNIT # 380	API #: 30-038-27491
--------------------------------	---------------------

Pit Type: <input checked="" type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
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Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Free oil or sheen present on pit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments: Continue to work on cleaning oil out of pits.		
Inspector Signature: WILLIE MOCK		
Printed Name: WILLIE MOCK		
Title: DRILLING CONSULTANT (T.D.C.I.)		
Date: 9/25/2008 Phone: (505) 7930528		

Record Retention: Submit with Closure
File: EH&S

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: ROSA UNIT # 380	API #: 30-038-27491
--------------------------------	---------------------

Pit Type: <input checked="" type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
--	--

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Free oil or sheen present on pit	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature: WILLIE MOCK		
Printed Name: WILLIE MOCK		
Title: DRILLING CONSULTANT (T.D.C.I.)		
Date: 9/23/2008 Phone: (505) 7930528		

Record Retention: Submit with Closure
File: EH&S

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: ROSA UNIT # 380	API #: 30-038-27491
--------------------------------	---------------------

Pit Type: <input checked="" type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
--	--

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Free oil or sheen present on pit	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature: WILLIE MOCK		
Printed Name: WILLIE MOCK		
Title: DRILLING CONSULTANT (T.D.C.I.)		
Date: 9/22/2008 Phone: (505) 7930528		

Record Retention: Submit with Closure
File: EH&S

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: ROSA UNIT # 380	API #: 30-038-27491
---------------------------------------	----------------------------

Pit Type: <input checked="" type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Free oil or sheen present on pit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments: Continue on Working on cleaning oil out of pits.		
Inspector Signature: WILLIE MOCK		
Printed Name: WILLIE MOCK		
Title: DRILLING CONSULTANT (T.D.C.I.)		
Date: 9/21/2008 Phone: (505) 7930528		

Record Retention: Submit with Closure
File: EH&S

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: ROSA UNIT # 380	API #: 30-038-27491
--------------------------------	---------------------

Pit Type: <input checked="" type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
--	--

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Free oil or sheen present on pit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments: Work on cleaning oil out of pits.		
Inspector Signature: WILLIE MOCK		
Printed Name: WILLIE MOCK		
Title: DRILLING CONSULTANT (T.D.C.I.)		
Date: 9/20/2008 Phone: (505) 7930528		

Record Retention: Submit with Closure
File: EH&S

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San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: ROSA UNIT # 380	API #: 30-038-27491
---------------------------------------	----------------------------

Pit Type: <input checked="" type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Free oil or sheen present on pit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments: Work on cleaning oil out of pits.		
Inspector Signature: WILLIE MOCK		
Printed Name: WILLIE MOCK		
Title: DRILLING CONSULTANT (T.D.C.I.)		
Date: 9/18/2008 Phone: (505) 7930528		

Record Retention: Submit with Closure
File: EH&S

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: ROSA UNIT # 380

API #: 30-038-27491

Pit Type: ☒ Drilling ☐ Workover ☐ Cavitation Inspection: ☒ Daily ☐ Weekly ☐ Monthly

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 vertical feet from berm top)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Free oil or sheen present on pit	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature: WILLIE MOCK		
Printed Name: WILLIE MOCK		
Title: DRILLING CONSULTANT (T.D.C.I.)		
Date: 9/18/2008 Phone: (505) 7930528		

Record Retention: Submit with Closure
File: EH&S

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720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: ROSA UNIT # 397-A	API #: 30-039-30437
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Pit Type: <input checked="" type="checkbox"/> Drilling <input type="checkbox"/> Workover <input type="checkbox"/> Cavitation	Inspection: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Free oil or sheen present on pit	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature: WILLIE MOCK		
Printed Name: WILLIE MOCK		
Title: DRILLING CONSULTANT (T.D.C.I.)		
Date: 9/17/2008 Phone: (505) 7930528		

Record Retention: Submit with Closure
File: EH&S

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720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
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Pit Type: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments: Pit fence is down in some spots. And pit has about 2' foot of liquid in it and there looks to be like black coal fines on the top of the water.		
Inspector Signature: _____		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 5-12-09 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

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San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
----------------------------------	----------------------------

Pit Type: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 10-2-08 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

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720 So. Main / PO Box 640
Aztec, NM 87410
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Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
----------------------------------	----------------------------

Pit Type: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 10-7-08 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

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Aztec, NM 87410
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Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
----------------------------------	----------------------------

Pit Type: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 10-14-08 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

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720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
----------------------------------	----------------------------

Pit Type: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 vertical feet from berm top)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 10-21-08 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

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Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
----------------------------------	----------------------------

Pit Type: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 10-28-08 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

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720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
----------------------------------	----------------------------

Pit Type: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Inspector Signature:		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 11-4-08 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

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San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
----------------------------------	----------------------------

Pit Type: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 vertical feet from berm top)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments:		
Pit has rain and melted snow water in it		
Inspector Signature:		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 11-11-08 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

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720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
----------------------------------	----------------------------

Pit Type: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments: Pit has rain and melted snow water in it		
Inspector Signature:		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 11-18-08 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

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Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
----------------------------------	----------------------------

Pit Type: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments: Pit has rain and melted snow water in it		
Inspector Signature:		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 11-25-08 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

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Aztec, NM 87410
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Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
----------------------------------	----------------------------

Pit Type: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 <u>vertical</u> feet from berm top)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments: Pit is covered in snow		
Inspector Signature:		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 12-2-08 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

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Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
----------------------------------	----------------------------

Pit Type: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 vertical feet from berm top)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments: Pit is covered in snow		
Inspector Signature:		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 12-9-08 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

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Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
----------------------------------	----------------------------

Pit Type: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Cavitation	Inspection: <input type="checkbox"/> Daily (Rig) <input checked="" type="checkbox"/> Weekly (Tech)
---	---

Pit Liner intact (no visible tears)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Report to EH&S immediately	Date / Time Reported to EH&S:
Pit Properly Fenced (no fence on rig side if on site)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required (if site fully fenced)	
Pit Slopes intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adequate freeboard (liquid level 2 vertical feet from berm top)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Does pit have oil or sheen on it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flare Pit free of liquids	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Comments: Pit is covered in snow		
Inspector Signature:		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 12-16-08 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

FACILITY INFORMATION

Facility Name: Rosa # 380	API #: 30-039-27491
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Comments: Pit is covered in snow		
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Title: Tech II 505-330-0190		
Date: 12-30-08 Phone: (505)947-4974		

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Inspector Signature:		
Printed Name: Stanley Dean		
Title: Tech II 505-330-0190		
Date: 1-6-09 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
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Date: 1-13-09 Phone: (505)947-4974		

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Date: 2-3-09 Phone: (505)947-4974		

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File: EH&S Well Files

Exploration & Production
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720 So. Main / PO Box 640
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Printed Name: Stanley Dean		
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Date: 2-10-09 Phone: (505)947-4974		

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File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



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Date: 2-17-09 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

Exploration & Production
San Juan Basin Operations
720 So. Main / PO Box 640
Aztec, NM 87410
505-634-4200 / 505-634-4205 fax



Temporary Pit Inspection

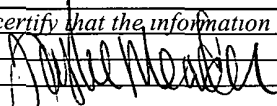
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Date: 2-24-09 Phone: (505)947-4974		

Record Retention: Submit with Closure
File: EH&S Well Files

Submit To Appropriate District Office Two Copies District I 1625 N French Dr., Hobbs, NM 88240 District II 1301 W Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S St Francis Dr., Santa Fe, NM 87505		State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505				Form C-105 July 17, 2008			
		1. WELL API NO.		30-039-27491					
		2 Type of Lease		<input type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> FED/INDIAN					
		3 State Oil & Gas Lease No		NMSF-078889					
WELL COMPLETION OR RECOMPLETION REPORT AND LOG									
4 Reason for filing <input type="checkbox"/> COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) <input checked="" type="checkbox"/> C-144 CLOSURE ATTACHMENT (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33, attach this and the plat to the C-144 closure report in accordance with 19 15 17 13 K NMAC)				5 Lease Name or Unit Agreement Name					
				Rosa Unit					
				6 Well Number					
				Rosa Unit #380					
7 Type of Completion									
<input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER									
8 Name of Operator				9 OGRID					
WILLIAMS PRODUCTION, LLC				120782					
10 Address of Operator				11 Pool name or Wildcat					
P O BOX 640 AZTEC, NM 87410									
12 Location	Unit Lt	Section	Township	Range	Lot	Feet from the	N/S Line		
Surface:									
BH:									
13 Date Spudded	14 Date T D Reached	15 Date Rig Released		16 Date Completed (Ready to Produce)		17 Elevations (DF and RKB, RT, GR, etc)			
		5/2/09							
18 Total Measured Depth of Well		19 Plug Back Measured Depth		20 Was Directional Survey Made?		21 Type Electric and Other Logs Run			
22 Producing Interval(s), of this completion - Top, Bottom, Name									
23 CASING RECORD (Report all strings set in well)									
CASING SIZE		WEIGHT LB /FT		DEPTH SET		HOLE SIZE			
24 LINER RECORD				25 TUBING RECORD					
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET		
26 Perforation record (interval, size, and number)				27 ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC					
				DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED			
28 PRODUCTION									
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)			Well Status (Prod or Shut-in)				
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl	Gas - Oil Ratio		
Flow Tubing Press	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl	Gas - MCF	Water - Bbl	Oil Gravity - API - (Corr)			
29 Disposition of Gas (Sold, used for fuel, vented, etc)						30 Test Witnessed By			
31 List Attachments									
32 If a temporary pit was used at the well, attach a plat with the location of the temporary pit Attached									
33 If an on-site burial was used at the well, report the exact location of the on-site burial									
Latitude 36 88485 Longitude -107 284359 NAD 1927 X 1983									
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief									
Signature			Printed Name		Title		Date		
					EH&S SPECIALIST				
E-mail Address:									

WILLIAMS PRODUCTION
TEMP PIT CLOSURE REPORT ADDENDUM
ROSA UNIT 380

Req #

- 1 Date & How free standing liquids removed in following manner: 5/15/2009
Liquids removed by vacuum truck and hauled to Basin Disposal, Permit # NM 01-0005
- 3 Return receipt sent & received from surface owner: Copy Attached
- 4 Rig off location on following date: 5/2/2009
Pit covered on following date: 5/26/2009
Reseeding started/scheduled for following date: Spring/Fall 2009
Date and mix to follow BLM/USFS COAs in APD per BLM:FFO/NMOCD MOU dated 5/4/09.
- 6 Pit liner removed on following date: 5/13/2009
Pit liner removed by following company: Adobe Construction

Pit liner removed in following manner:
Cut liner above mud level after stabilization by manually &/or mechanically cutting liner. Removed all
anchored material on date given.
Facility where Pit liner disposed: S.J. Regional Landfill, NMED Permit SWM-052426
- 7 Solidification process accomplished in following manner:

Adobe construction used combination of natural drying & mechanical mixing. Pit contents were mixed with
non-waste, earthen material to a consistency that is safe & stable. The mixing ratio has not exceeded 3
parts non-waste to 1 part pit contents.
- 8 Five point composite sample provided: Envirotech Results Attached
- 9 Testing of earth by following company: Envirotech, Inc.

Material & method used for solidification, non-waste earthen material:
Grading & backfilling area with approximately 4' of soils and earthen materials recovered during site
construction, to one foot consisting of topsoil.
- 10 Re-contouring to match surrounding geography done in following manner (using BMP's):

ROSA UNIT 380

Reestablish drainage and contours to approximately match previous topography meeting Conditions of Approval in APD and as specified by Surface Management Agency Inspectors.

- 11** Sundry (C103) to NMOCD when area seeded and seed mix used:
Williams will comply with Surface Management Agency reseeding requirements in COAs of the APD for the referenced well, per BLM:FFO/NMOCD MOU dated 5/4/09.
-
- 12** Date pit was covered: 5/26/209
- 13** Company setting steel marker on site: Adobe Construction
Date marker set: 12/3/2009
Type cmt & depth of cmt to place marker: 2 sx Pre-mixed concrete @ 4' depth
Type of marker used: (check one) Plate
Pertinent information on marker (operator, lease, well name/#, S-T-R-UL):
Williams Production, Rosa Unit #380, Unit L, Sec. 20; T31N; R4W, RIO Arriba Co. in place burial
-

Attached information :

- **** Sample results from Form C141 (Release Notification & Corrective Action) Attached
- Date & time release occurred: NA
- **** C105 (Completion Rpt) w/Applicable Pit Information Attached

WILLIAMS PRUD.
ROSA UNIT 380
UNIT L SEC. 20
T31N R4W
RIO ARRIBA CO.
IN PLACE BURIAL

12.02.2009

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
PO Drawer DD, Artesia, NM 88211-0719

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

District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 21, 1994

Instructions on back
Submit to Appropriate District Office

State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

Permit #463

WELL LOCATION AND ACREAGE DEDICATION PLAT

RCVD JUN 7 '12
OIL CONS. DIV.

*API Number 30-039-27491		*Pool Code 71629	*Pool Name BASIN FRUITLAND COALIST. 3
*Property Code 17033	*Property Name ROSA UNIT		*Well Number 380
*OGRID No 120782	*Operator Name WILLIAMS PRODUCTION COMPANY		*Elevation 6705'

¹⁰ Surface Location

UL or lot no L	Section 20	Township 31N	Range 4W	Lot Idn	Feet from the 2600	North/South line SOUTH	Feet from the 750	East/West line WEST	County RIO ARriba
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹² Dedicated Acres 320.0 Acres - (W/2)					¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No		

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	<p>¹⁷ OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief</p> <p>Signature _____</p> <p>Printed Name _____</p> <p>Title _____</p> <p>Date _____</p>
	<p>¹⁸ SURVEYOR CERTIFICATION</p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief</p> <p>Date Revised: MAY 18, 2005</p> <p>Date of Survey: MAY 12, 2001</p> <p>Signature and Seal of Professional Surveyor</p> <div style="text-align: center;"><p>JASON C. EDWARDS Certificate Number 15269</p></div>