Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103
Office District I	Energy, Minerals and Natural Resources		May 27, 2004
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION	ON DIVISION	30-039-29546
District III	1220 South St. F	rancis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM		STATE FEE 6. State Oil & Gas Lease No.
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	34.14.1	2015 26 27 20 20	o. State On & Gas Lease No.
87505		(1) 20 m	
SUNDRY NOTE (DO NOT USE THIS FORM FOR PROPO	ICES AND REPORTS ON WELL	DS S	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLIE	CATION FOR PERMIT" (FORM C) 101) FOR SUCH STA	Rosa
PROPOSALS.)			8 Well Number 260A
1. Type of Well: Oil Well	Gas Well Other		
2. Name of Operator	Production Company II A		9. OGRID Number
3. Address of Operator	Production Company, LLC		120782 10. Pool name or Wildcat
999 Godda	rd Ave., Ignacio, CO 81137	45 STITUTE 2300	Fruitland Coal
4. Well Location			
Unit LetterO_: _790feet from the _ FSL _ line and _1960 _feet from the FEL _ line			
Section 21 Township 31N Range 06W NMPM County Rio Arriba			
	11. Elevation (Show whether I		
		75' GR	
Pit or Below-grade Tank Application ⊠ or Closure □			
Pit typeDepth to Groundwater_>	>100 ft_Distance from nearest fresh w	vater well>1000 ft Dis	stance from nearest surface water>500 ft_
Pit Liner Thickness: mil	Below-Grade Tank: Volume	120 hhls; Const.	nction Material Steel (Plastic Liner)
12. Check A NOTICE OF IN PERFORM REMEDIAL WORK □	Appropriate Box to Indicate ITENTION TO: PLUG AND ABANDON		SEQUENT REPORT OF:
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	LLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB
071150		07.450	
OTHER:	lated energians (Clearly state)	OTHER:	Laive nortinent dates including estimated date
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.			
Below Grade tank to be located approximately 50 feet from well head. BGT constructed, operated and closed in accordance with NMOCD guidelines and Williams procedures.			
I hereby certify that the information	above is true and complete to the	e hest of my knowledge	and belief. I further certify that any pit or below-
			or an (attached) alternative OCD-approved plan .
1			-
SIGNATURE	TITLE	EH&S Specialist	DATE <u>6/28/05</u>
Type or print name Michael K.	Lane E-mail address: my	ke.lane@williams.c	om Telephone No. 970-563-3319
For State Use Only	SE	PUTY OIL & GAS INCOM	CTOR DICT CO. ILIAI O O OCC-
APPROVED BY: // Vil. Conditions of Approval (if any):	Panueva TITLE		CTOR, DIST. 60 JUN 2 9 2005