

UNITED STATES
DEPARTMENT OF INTERIOR
BUREAU OF LAND MANAGEMENT

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

SUNDRY NOTICE AND REPORTS ON WELLS

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

2006 FEB 27 PM 12 53

5. Lease Designation and Serial No.
SF-078769

6. If Indian, Allottee or Tribe Name

RECEIVED

OTO FARMINGTON

SUBMIT IN TRIPLICATE

If Unit or CA, Agreement Designation
NMNM78407X D

1. Type of Well
Oil Well ☒ Gas Well ☐ Other ☐

8. Well Name and No.
ROSA UNIT #363A

2. Name of Operator
WILLIAMS PRODUCTION COMPANY

9. API Well No.
30-039-29527

3. Address and Telephone No.
PO BOX 3102 MS 25-2, TULSA, OK 74101 (918) 573-6254

10. Field and Pool, or Exploratory Area
BASIN FRUITLAND COAL

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
2620' FSL & 600' FEL, NE/4 SE/4 SEC 17-T31N-R05W

11. County or Parish, State
RIO ARRIBA, NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
Notice of Intent	Abandonment
X Subsequent Report	Recompletion
Final Abandonment	Plugging Back
	Casing Repair
	Altering Casing
	Other <u>Production Test</u>
	Change of Plans
	New Construction
	Non-Routine Fracturing
	Water Shut-Off
	Conversion to Injection
	Dispose Water
	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Attached is the IP test that was conducted on the above well on December 18, 2005.



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

Signed Tracy Ross
Tracy Ross

Title Sr. Production Analyst

Date February 22, 2006

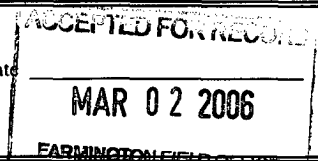
(This space for Federal or State office use)

Approved by _____

Title _____

Date _____

Conditions of approval, if any:



Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

NMOCDD

NEW MEXICO OIL CONSERVATION COMMISSION
MULTIPOINT AND ONE POINT BACK PRESSURE TEST FOR GAS WELL

Operator Williams Production Company					Lease or Unit Name Rosa Unit				
Test Type X Initial Annual Special			Test Date 12/18/2005		Well Number (API #) #363A (API # 30-039-29527)				
Completion Date 9/27/2005		Total Depth 3274'		Plug Back TD		Elevation 6322'		Unit Sec Twp Rng I 17 31N 05W	
Casing Size 7"		Weight 23#		Set At 3233'		Perforations:		County Rio Arriba	
Tubing Size 2 7/8"		Weight 6.5#		Set At 3223'		Perforations:		Pool Basin	
Type Well - Single-Bradenhead-GG or GO Multiple				Packer Set At		Formation Fruitland Coal			
Producing Thru Tubing		Reservoir Temp. oF		Mean Annual Temp. oF		Barometer Pressure - Pa		Connection	
L	H	Gq 0.6	%CO2	%N2	%H2S	Prover 3/4"	Meter Run	Taps	

FLOW DATA				TUBING DATA		CASING DATA			
NO	Prover Line Size	X Orifice Size	Pressure p.s.i.q	Temperature oF	Pressure p.s.i.q	Temperature oF	Pressure p.s.i.q	Temperature oF	Duration of Flow
SI	2" X 3/4"				230	67	1100		0
1					220	67	1060		0.5 hr
2					220	60	1060		1.0 hr
3					190	60	940		1.5 hrs
4					285	52	940		2.0 hrs
5					285	52	890		3.0 hrs

RATE OF FLOW CALCULATION									
NO	Coefficient (24 Hours)			hwPm	Pressure Pm	Flow Temp. Factor Fl	Gravity Factor Fq	Super Compress. Factor, Fpv	Rate of Flow Q, Mcfd
1	9.604				297	1.0078	1.29	1.021	3786
2									
3									
4									

NO	Pr	Temp. oR	Tr	Z	Gas Liquid Hydrocarbon Ration	Mcf/bbl.
1					A.P.I Gravity of Liquid Hydrocabrons _____	Deq.
2					Specific Gravity Separator _____	XXXXXX
3					Specific Gravity Flowing Fluid xxxxxxxxxxxx	
4					Critical Pressure _____ p.s.i.a.	_____ p.s.i.a.
5					Critical Temperature _____ R	_____ R

Pc	1112	Pc2	1236544
NO	Pt1	Pw	Pw2
1		902	813604
2			
3			
4			

Absolute Open Flow 8465		Mcf @ 15.025	Angle of Slope _____	Slope, n 0.75
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Remarks:			
Approved By Commission:	Conducted By: Mark Lepich	Calculated By: Tracy Ross	Checked By: