Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103
District I	Energy, Minerals and Natural Resources		May 27, 2004
1625 N. French Dr., Hobbs, NM 88240			VELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210			0-039-29671
District III 1220 South St. Francis Dr.		rancis Dr.	Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		87505	State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	,		MNM-078407D
87505	CICES AND DEPORTS ON WET	47 K (3 20 2 1 20 C 9 38)	
SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name			
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C:101) FOR SUCH 2000 ROSSON (A)			
PROPOSALS.)		LIESTATION (PA	Well Number 266A
1. Type of Well: Oil Well	Gas Well Other	DIL CONS DAY 18	
2. Name of Operator Williams Production Company, LLC 120782			
3. Address of Operator	1 Toddotton Company, ELO		0. Pool name or Wildcat
	ox 640, Aztec, NM 87410	3 72 6	Basin Fruitland Coal
4. Well Location		5.66, 16 NOS	
Unit LetterP :1170feet from theFSL _ line and925feet from theFELline			
Section 28 Township 31N Range 05W NMPM County Rio Arriba			
Section 20 To	11. Elevation (Show whether I		ILY KIO AITIDA
		69' GR	
Pit or Below-grade Tank Application ☑ or Closure □			
Pit typeDepth to Groundwater_>100 ft_Distance from nearest fresh water well_>1000 ft_ Distance from nearest surface water_>500 ft_			
Pit Liner Thickness: mil	Below-Grade Tank: Volume	120 bbls: Construc	tion Material Steel-Double Wall & Bottom
			<u>-</u>
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF I	NTENTION TO:	SUBSE	EQUENT REPORT OF:
PERFORM REMEDIAL WORK		REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐			
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT J	OB 🔲
07.150			_
OTHER:		OTHER:	
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion			
or recompletion.			
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	a above is true and complete to the	hest of my knowledge a	nd belief. I further certify that any pit or below-
grade tank has been/will be constructed of	r closed according to NMOCD guidelin	es 🛛, a general permit 🔲 or	an (attached) alternative OCD-approved plan .
		_, . _	, , , , , , , , , , , , , , , , , , , ,
SIGNATURE CONTRACTOR	TITLE	EH&S Specialist	DATE <u>4/26/06</u>
			-
Type or print name Michael K.	Lane E-mail address: my	ke.lane@williams.con	n Telephone No. 505-634-4219
For State Use Only			
	1		_
APPROVED BY: Brandon Conditions of Approval (if any):	. Donall TITLE	DEPUTY OR & GAS IN	DATE APR 2 7 2006
Conditions of Approval (if any):			