| In Lieu of  |
|-------------|
| Form 3160   |
| (June 1990) |

## **UNITED STATES** DEPARTMENT OF INTERIOR BUREAU OF LAND MANAGEMENT

| 2007 | JUL | 23 |  |
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FORM APPROVED
Budget Bureau No 1004-0135
Expires: March 31, 1993

| Do not  | SUNDRY NOTICE AND use this form for proposals to drill or to deepen of   | REPORTS ON WELLS  Treentry to a different reservoir USE TATP TO AND TO AND THE PROPERTY OF THE | Lease Designation and Serie   | al No.                         |  |  |
|---|--|--|---|--------------------------------|--|--|
|   | TO DRILL" for perm   | it for such proposals  | 6. If Indian, Allottee or Tribe                                     | Name                           |  |  |
|   | SUBMIT IN  | TRIPLICATE   | 7. If Unit or CA, Agreement D                                       | Designation                    |  |  |
|   | SODWIT IIV   | KII LICATE   |   |                                |  |  |
| 1.  | Type of Well Oil Well X Gas Well Other   |  | 8. Well Name and No.<br>ROSA UNIT #370                              |                                |  |  |
| 2.  | Name of Operator     WILLIAMS PRODUCTION COMPANY   |  | 9. API Well No.<br>30-039-29984                                     | <del></del> .                  |  |  |
| 3.  |  |  | 10. Field and Pool, or Explorate BASIN FRUITLAND COA                | -                              |  |  |
| 4.  | <ol> <li>Location of Well (Footage, Sec., T., R., M., or Survey Description)</li> <li>10' FSL &amp; 1635' FWL, SE/4 SW/4 SEC 19-T31N-R04W</li> </ol> |  | County or Parish, State<br>RIO ARRIBA, NM                           |                                |  |  |
|   | CHECK APPROPRIA  | TE BOX(s) TO INDICATE NATURE OF NOTICE, REP  | ORT OR OTHER DATA   |                                |  |  |
|   | TYPE OF SUBMISSION   |  | F ACTION  |                                |  |  |
|   | Notice of Intent   | Abandonment  | Change of Plans   |                                |  |  |
|   |  | Recompletion   | New Construction  |                                |  |  |
|   | X Subsequent Report  | Plugging Back Casing Repair  | Non-Routine Fracturing Water Shut-Off                               |                                |  |  |
|   | Final Abandonment  | Altering Casing  | Conversion to Injection   |                                |  |  |
|   |  | Other Set surface csg  | Dispose Water   |                                |  |  |
|   |  |  | (Note Report results of mon Well Completion or Reco                 |                                |  |  |
|   |  |  | and Log form)   |                                |  |  |
| 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 )* |  |  |   |                                |  |  |
| ST&C<br>cemer<br>job, 15  | csg as follows: guide shoe, 1 jt csg,<br>nters & cmt as follows: 261 sxs (368 cu.  | '(TD surface hole @ 1400 hrs, 7/19/07). PO<br>insert float, 6 jts csg (323') + landing jt (34'<br>ft.) Type III + 2% CaCl 2 + ¼ #/sk Cello Flake,<br>C on surface csg @ surface), 46 bbls cmt pur<br>250 psi. WOC, install WH & NU BOP   | '). Land csg @ 337' @ 1730 hr<br>1.41 ft^3/sk = 14.5 ppg, good retu | s, 7/19/07. RU rns through out |  |  |
|   |  |  | RCVD JUL 2  | <i>₹~</i> 3 <i>~</i> 5~        |  |  |
|   |  |  | OIL CONS. DIV.  |                                |  |  |
| Report PT next report   |  |  | oil viito.<br>Notes   |                                |  |  |
| K   | epour 1 min 19   |  | ه ۽ الميانية  | <u>.</u>                       |  |  |
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|   |  |  |   |                                |  |  |
|   |  |  |   |                                |  |  |
| 14.   | I hereby certify that the foregoing is true and o  | Porrect  |   |                                |  |  |
|   | Signed Macy Ross Tracy Ross  | Title Sr. Production Analyst   | tteJuly 20, 2007  |                                |  |  |
|   | (This space for Federal or State office use)   |  |   |                                |  |  |
|   | Approved by  | Title  | Date  | <del></del>                    |  |  |
|   | Conditions of approval, if any:  |  |   | ~~~~                           |  |  |
| Title 18  | U.S.C. Section 1001, makes it a crime for any ne   | rson knowingly and willfully to make to any department or  | ngency of the United States and false, fict                         |                                |  |  |
|   | 2 ,  | ,  |   |                                |  |  |

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statements or representations as to any matter within its jurisdiction.