

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 & Natural Resources  
Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-10  
Revised June 10, 200  
Submit to Appropriate District Office  
5 Copies

☒ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address WILLIAMS PRODUCTION COMPANY P.O. Box 640 Aztec, NM 87410		<sup>2</sup> OGRID Number 120782
		<sup>3</sup> Reason for Filing Code/ Effective Date CORRECT POOL-1/1/09
<sup>4</sup> API Number 30-039-22538	<sup>5</sup> Pool Name BASIN MANCOS	<sup>6</sup> Pool Code 97232 ✓
<sup>7</sup> Property Code 17033	<sup>8</sup> Property Name ROSA UNIT	<sup>9</sup> Well Number 77

II. <sup>10</sup> Surface Location

Ul or lot no. L	Section 33	Township 31N	Range 5W	Lot.Idn	Feet from the 1820	North/South Line SOUTH	Feet from the 810	East/West line WEST	County RIO ARRIBA
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<sup>11</sup> Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
<sup>12</sup> Lse Code J	<sup>13</sup> Producing Method Code	<sup>14</sup> Gas Connection Date	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
009018	GIANT REFINING P O BOX 12999 SCOTTSDALE AZ 85267	O
025244	WILLIAMS FIELD SERVICES P O BOX 645 TULSA OK 74102	G

Pool Name changed from Laguna Seca Gallup to Basin Mancos Order #13063. All other information from original report remains the same.

IV. Well Completion Data

<sup>21</sup> Spud Date	<sup>22</sup> Ready Date	<sup>23</sup> TD 8165	<sup>24</sup> PBTD	<sup>25</sup> Perforations 71660-7715	<sup>26</sup> DHC, MC DHC AZT- 4085
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size 2 3/8	<sup>29</sup> Depth Set 8068	<sup>30</sup> Sacks Cement RCVD AUG 6 '09		
			OIL CONS. DIV.		
			DIST. 3		

VI. Well Test Data

<sup>31</sup> Date New Oil	<sup>32</sup> Gas Delivery Date	<sup>33</sup> Test Date	<sup>34</sup> Test Length	<sup>35</sup> Tbg. Pressure	<sup>36</sup> Csg. Pressure
<sup>37</sup> Choke Size	<sup>38</sup> Oil	<sup>39</sup> Water	<sup>40</sup> Gas		<sup>41</sup> Test Method
<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: Heather Riley			OIL CONSERVATION DIVISION		
Printed name: Heather Riley			Approved by: accepted for record		
Title: Regulatory Specialist			Title:		
E-mail Address: Heather.riley@williams.com			Approval Date:		
Date: 8/6/09		Phone: 505-634-4222			

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State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-102  
Revised October 12, 2005  
Instructions on back  
Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

☒ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30-039-22538	<sup>2</sup> Pool Code 97232 / 72319 / 71599	<sup>3</sup> Pool Name BASIN MANCOS / BLANCO MESAVERDE / BASIN DAKOTA
<sup>4</sup> Property Code 17033	<sup>5</sup> Property Name ROSA UNIT	<sup>6</sup> Well Number 77
<sup>7</sup> OGRID No. 120782	<sup>8</sup> Operator Name WILLIAMS PRODUCTION COMPANY	<sup>9</sup> Elevation 6531'

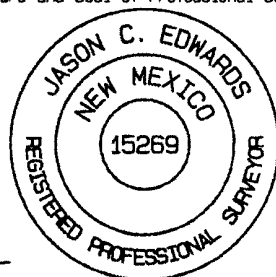
<sup>10</sup> Surface Location

UL or lot no. L	Section 33	Township 31N	Range 5W	Lot Idn	Feet from the 1820	North/South line SOUTH	Feet from the 810	East/West line WEST	County RIO ARriba
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<sup>11</sup> 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
								PCUD AUG 6 '09	
<sup>12</sup> Dedicated Acres 320.0 Acres - (S/2)	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No. R-13063	OIL CONS. DIV. DIST. 3					

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

<sup>16</sup> 5286.60'	<sup>17</sup> OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom-hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division. <i>Heather Riley Skelton</i> Signature Date <i>Heather Riley</i> Printed Name
<sup>18</sup> SURVEYOR CERTIFICATION 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 INFORMATION OF RECORD Date Plat Drawn: AUGUST 5, 2009 Signature and Seal of Professional Surveyor  <i>JASON C. EDWARDS</i> Certificate Number 15269	

5280.00' 5280.00' 5280.00' 5280.00'

LAT: 36.85388°N  
LONG: 107.37389°W  
DATUM: NAD1983

810' 1820'

33

LEASE  
SF-078773

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

CORRECTED WELL COMPLETION OR RECOMPLETION REPORT AND LOG*						5. LEASE DESIGNATION AND LEASE NO. NMSF-078771	
1a TYPE OF WELL <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER						6 IF INDIAN ALLOTTEE OR	
b TYPE OF COMPLETION: NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF.RESVR <input type="checkbox"/> X OTHER						7 UNIT AGREEMENT NAME Rosa Unit	
2 NAME OF OPERATOR WILLIAMS PRODUCTION COMPANY						8 FARM OR LEASE NAME, WELL NO Rosa Unit #077	
3 ADDRESS AND TELEPHONE NO P.O. Box 640, Aztec, NM 87410 (505) 634-4208						9 API WELL NO. 30-039-22538	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At Surface 1820' FSL & 810' FWL, Sec 33, T31N, R5W At top production interval reported below : Same At total depth: Same						10 FIELD AND POOL, OR WILDCA Basin Mancos	
						11 SEC., T., R., M., OR BLOCK AND SURVEY OR AREA NW/4 SW/4, Sec 33, T31N, R5W	
						12 COUNTY OR Rio Arriba P ARISH 13 STATE New Mexico	
15 DATE SPUDDED DDDD		16 DATE T D REACHED		17. DATE COMPLETED (READY TO PRODUCE)		14 PERMIT NO	
20 TOTAL DEPTH, MD & TVD		21. PLUG. BACK T D . MD & TVD		22 IF MULTICOMP., HOW MANY		DATE ISSUED	
24 PRODUCING INTERVAL(S). OF THIS COMPLETION - TOP, BOTTOM, NAME (MD AND TVD)*						18 ELEVATIONS (DK, RKB, RT.GR.ETC )*	
26 TYPE ELECTRIC AND OTHER LOGS RUN						23 INTERVALS DRILLED BY	
28 CASING REPORT (Report all strings set in well)						19. ELEVATION CASINGHEAD	
CASING SIZE/GRADE		WEIGHT, LB/FT		DEPTH SET (MD)		HOLE SIZE	
						TOP OF CEMENT, CEMENTING RECORD	
						AMOUNT PULLED	
29 LINER RECORD						30 TUBING RECORD	
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
						SCREEN (MD)	
						SIZE	
						DEPTH SET (MD)	
						PACKER SET (MD)	
						32 ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC	
						DEPTH INTERVAL (MD)	
						AMOUNT AND KIND OF MATERIAL USED	
						RCVD AUG 6 '09	
						OIL CONS. DIV.	
33 PRODUCTION						DIST. 3	
DATE OF FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping-size and type of pump)				WELL STATUS (PRODUCING OR SI)	
DATE OF TEST		TESTED		CHOKE SIZE		PROD'N FOR TEST PERIOD	
						OIL - BBL	
						GAS - MCF	
FLOW TBG PRESS		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL - BBL	
						GAS - MCF	
						WATER - BBL	
						OIL GRAVITY-API (CORR )	
34 DISPOSITION OF GAS (Sold, used for fuel, vented, etc )						TEST WITNESSED BY	
35 LIST OF ATTACHMENTS							

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

SIGNED Regulatory Specialist TITLE Regulatory Specialist DATE 8/6/09