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

DEPARTMENT OF INTERIOR RECEIVED **BUREAU OF LAND MANAGEMENT**

FORM APPROVED Budget Bureau No 1004-0135

SUNDRY NOTICE AND REPORTS ON WELLS roposals to drill or to deenen or recent to the sum of the sum o Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION affilington Field Office" TO DRILL" for permit for such proposate ureau of Land Management

5. Lease Designation and Serial No. NMSF-078771

If Indian, Allottee or Tribe Name

and Log form.)

| | SUBMIT IN TRIPLICATE | 7. | If Unit or CA, Agreement Designation ROSA UNIT |
|----|--|-----|--|
| 1. | Type of Well Oil Well X Gas Well Other | 8. | Well Name and No. ROSA UNIT #16D |
| 2. | Name of Operator WILLIAMS PRODUCTION COMPANY | 9. | API Well No. 30-039-30749 |
| 3. | Address and Telephone No. PO BOX 3102 MS 25-4, TULSA, OK 74101 (918) 573-3046 | 10. | Field and Pool, or Exploratory Area BLANCO MV/BASIN MC/BASIN DK |
| 4. | Location of Well (Footage, Sec., T., R., M., or Survey Description) 1015' FSL, 1300' FWL | 11 | County or Parish, State |
| | 2034' FSL, 1974' FWL SEC 14, T31N, R06W | | RIO ARRIBA, NEW MEXICO |

TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonment Change of Plans Recompletion New Construction X Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Water Shut-Off Altering Casing Conversion to Injection Final Abandonment EOther Reallocation Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report

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

Williams E&P has run Protechnics' Completion profiler tool for allocation purposes on the Rosa Unit #16D. Based on the results obtained, Williams proposes the following allocation:

| Total | 100% | 793 | Mcf/d | · |
|-----------|------|-----|---------|----------------|
| Dakota | 10% | 80 | Mcf/d | DIST. 3 |
| Mancos | 23% | 188 | 2 # 0/4 | OIL CONS. DIV. |
| Mesaverde | 67% | 525 | Mcf/d | RCVD AUG 4'10 |

| 14. | I hereby certify that the Signed Rachel Lippe | | Title Engineering T | echnician II | Date July 27, 2 | 2010 . | |
|-----|---|----------------------|---------------------|--------------|-----------------|--------|--|
| | (This space for Federal of | or State office use) | | | | | |
| | Approved by _ | Joe Henrit | Title | 600 | Date | P-2-10 | |
| | 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. NINAOCT

^{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)*