Form 3160 DEPARTME	reentry to a different reservoir. Use "APPLICATION t for such proposals	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No. SF-078767 6. If Indian, Allottee or Tribe Name 7. If Unit or CA, Agreement Designation
1. Type of Well Oil Well X Gas Well Other OCT 2001		8. Well Name and No. ROSA UNIT #30B
Name of Operator WILLIAMS PRODUCTION COMPANY	CHLOON DIV AND DIST. S	9. API Well No. 30-039-26601
3. Address and Telephone No. PO BOX 3102 MS 37-2, TULSA, OK 74101		10. Field and Pool, or Exploratory Area BLANCO MV/BASIN DAKOTA
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 20' FSL & 2360' FWL, SE/4 SW/4 SEC 12-31N-06W		11. County or Parish, State RIO ARRIBA, MN
CHECK APPROPRIA	TE BOX(s) TO INDICATE NATURE OF NOTICE, RE	PORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent X Subsequent Report	Abandonment Recompletion Plugging Back	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off
Final Abandonment	Casing Repair Altering Casing Other <u>Spud</u>	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
Describe Proposed or Completed Operations (is directionally drilled, give subsurface location) This well was spud @ 2215 hrs 9/09/0	ons and measured and true vertical depths for all markers	
APD/ROW		PECHNED M SEP 27 M 9: 21 070 Established Add
14. I hereby certify that the foregoing is true and Signed Tracy Ross	correct Title Production Analyst	Date September 12, 2001
(This space for Federal or State office use)		
Approved by	Title	Date
Conditions of approval, if any:		CCEPTED FOR RECORL
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.		