District I 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Road, Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico Energy Minerals and Natural Reg

Form C-144

June 1, 2004

Oil Conservation Division 1220 South St. Francis Dr. So Santa Fe, NM 87505

For drilling and production facilities, submit to appropriate NMOCD District Office.
For downstream facilities, submit to Santa Fe office _

Pit or Belov	w-Grade	Tank Regist	ration or Closure
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Is pit or below-grade tank covered by a general plan, Yes X No 7

Type of action: Registration of a pit or below-grade tank X e-mail address: Olivia mchamara@williams.com Operator: Williams Production Company, LLC. Telephone: 918-573-5314 Address: 999 Goddard Ave Ignacio, CO 81137 API#: 300453208000 U/L or Qtr/Qtr Sec 8P T 32N R 11W Facility or well name: Cox Canyon 8B Latitude 36.59350 Longitude -108.00210 NAD: 1927 🗌 1983 X Surface Owner Federal 🔲 State X Private 🔲 Indian 🔲 County: San Juan Below-grade tank Pit Type: Drilling X Production

Disposal Volume: _bbl Type of fluid: ___ Emergency Workover Construction material: Lined X Unlined [Double-walled, with leak detection? Yes If not, explain why not. Liner type: Synthetic X Thickness 20 mil Clay Pit Volume 6000 bbl Depth to ground water (vertical distance from bottom of pit to seasonal high 50 feet or more, but less than 100 feet (10 points) water elevation of ground water.) Wellhead protection area: (Less than 200 feet from a private domestic No (0 points) water source, or less than 1000 feet from all other water sources.) Distance to surface water: (horizontal distance to all wetlands, playas, irrigation canals, ditches, and perennial and ephemeral watercourses.) 1000 feet or more (0 points) 10 Ranking Score (Total Points) If this is a pit closure: (1) attach a diagram of the facility showing the pit's relationship to other equipment and tanks. (2) Indicate disposal location: (check the onsite box if your are burying in place) onsite X offsite \(\square\) If offsite, name of facility . (3) Attach a general description of remedial action taken including remediation start date and end date. (4) Groundwater encountered: No X Yes 🔲 If yes, show depth below ground surface__ ft. and attach sample results. (5) Attach soil sample results and a diagram of sample locations and excavations. Additional Comments: I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that the above-described pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines 🗌 , a general permit X, or an (attached) alternative OCD-approved plan 🔲, closed in accordance with stipulations outlined in the Authority for Permit to Drill and the attached closure plan X. Date: 9/14/2004 Printed Name/Title Olivia McNamara EH&S Specialist Signature/ Your certification and NMOCD approval of this application/closure does not relieve the operator of liability should the contents of the pit or tank contaminate ground water or otherwise endanger public health or the environment. Nor does it relieve the operator of its responsibility for compliance with any other federal, state, or local laws and/or exputy on a gas inspector, dist. (13) Printed Name/Title Date: