

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED

FORM APPROVED  
OMB No 1004-0137  
Expires March 31, 2007

SEP 14 2011

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.  
Bureau of Land Management

SUBMIT IN TRIPLICATE - Other instructions on page 2

|  |  |  |
|--|--|--|
| 1. Type of Well<br><br><input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other |  | 6. Lease Serial No.<br>SF-078769                                 |
| 2. Name of Operator<br>Williams Production Company, LLC  |  | 7. If Unit of CA/Agreement, Name and/or No.<br>Rosa NM NM-78407A |
| 3a. Address<br>PO Box 640 Aztec, NM 87410  | 3b. Phone No (include area code)<br>505-333-1808 | 8. Well Name and No.<br>Rosa Unit #153A                          |
| 4. Location of Well (Footage, Sec., T, R, M, or Survey Description)<br>1085' FNL & 720' FEL SEC 17 31N 5W                            |  | 9. API Well No<br>30-039-25524-6329                              |
|  |  | 10. Field and Pool or Exploratory Area<br>Blanco MV              |
|  |  | 11. Country or Parish, State<br>Rio Arriba, NM                   |

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION                                    | TYPE OF ACTION                                |   |  |  |
|---|---|---|--|--|
| <input type="checkbox"/> Notice of Intent             | <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off                  |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity                  |
| <input type="checkbox"/> Final Abandonment Notice     | <input type="checkbox"/> Casing Repair        | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete                | <input checked="" type="checkbox"/> Other FIRST DELIVERY |
|   | <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       |  |
|   | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back        | <input type="checkbox"/> Water Disposal            |  |

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

This well was first delivered on 12/8/00



|  |                     |
|--|---------------------|
| 14. I hereby certify that the foregoing is true and correct<br>Name (Printed/Typed)<br>Larry Higgins | Title Permit Suprv. |
| Signature <i>Larry Higgins</i>   | Date 9/14/11        |

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

|   |        |      |
|---|--------|------|
| Approved by   | Title  | Date |
| Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. | Office |      |

ACCEPTED

SEP 15 2011

FAR  
BY

*CM*

NMOCD