Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103
Office District 1	Energy, Minerals and Natural Resources		May 27, 2004
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.	
District II	OIL CONSERVATION DIVISION		30-045-32196
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE
District IV	rict IV		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM			
SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name			
ADO NOT LICE THE FORM FOR PROPOSALS TO DRILL OR TO DESPENO PROPOSALS AS A SALE OF THE PROPOSALS AS A S			
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			Rosa
PROPOSALS.)		8. Well Number 151C	
	Gas Well Other	and the state of	
			9. OGRID Number
Williams Production Company, LLCS			
3. Address of Operator			10. Pool name or Wildcat
999 Goddard Ave., Ignacio, CO 81137		Blanco Mesa Verda/DK	
4. Well Location			
Unit Letter N :	665 feet from the S line an	d 1450	feet from the W line
	wnship 32N Range 06W NMPM		County San Juan
Section 33 10			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6474' GR			
Pit or Below-grade Tank Application or Closure			
Pit typeDepth to Groundwater_>100 ft_Distance from nearest fresh water well_>1000 ft_ Distance from nearest surface water_>500 ft_			
Pit Liner Thickness: mil Below-Grade Tank: Volume 120 bbls; Construction Material Steel (Plastic Liner)			
12. Charle Assume with Dan to Italiant Nature of Nation Danset or Other Date			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			
-	-		
TEMPORARILY ABANDON			
PULL OR ALTER CASING	MULTIPLE COMPL	ING/CEMEN	T JOB
OTUED:		ICD.	
OTHER:	OTH		1
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date			
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion			
or recompletion.			
Below Grade tank to be located approximately 50 feet from well head. BCT constructed approach and closed in accordance			
Below Grade tank to be located approximately 50 feet from well head. BGT constructed, operated and closed in accordance			
with NMOCD guidelines and Williams procedures.			
I hereby certify that the information	above is true and complete to the best of	my knowledg	e and belief. I further certify that any pit or below-
grade tank has been/will be constructed or closed according to NMOCD guidelines 🗵, a general permit 🗌 or an (attached) alternative OCD-approved plan 🗌.			
SIGNATURE	TITLE EH&	S Specialist	DATE 6/2/05
<i>y</i>			
Type or print name Michael K.	Lane E-mail address: myke.lane@	@williams.c	om Telephone No. 970-563-3319
		-	
For State Use Only	A REPORT	Oli a a -	SPECTOR PIET JUN -3 2005
<i>f</i>		uil & GAS IN	SPECTOR, DIST. ## DATE
APPROVED BY:	TITLE		DATE
Conditions of Approval (if any):	7/9/// IIILE		DAIEDAIE