Submit 3 Copies To Appropriate Distr	state of New N	1 exico	Form C-103	
Office District I	Energy, Minerals and Na	tural Resources	May 27, 2004	_
1625 N. French Dr., Hobbs, NM 8824	0		WELL API NO.	
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 882	OIL CONSERVATION	N DIVISION	30-045-29594	4
District III	1220 South St. F	ancis Dr.	5. Indicate Type of Lease STATE FEE □	
1000 Rio Brazos Rd., Aztec, NM 874	Santa Fe, NM	875051 5 6 5		-
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM		1734 5 6 7 8 g	E-504	
87505	TOTAL COLUMN TO THE COLUMN TO			-
SUNDRY N	IOTICES AND REPORTS ON WELL OPOSALS TO DRILL OR TO DEEPEN OR PPI ICATION FOR PERMIT" (FORM CAN)	ES DEC 2005	Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "A	PPLICATION FOR PERMIT" (FORM C)	10160001-1000	र्ह्या Ægesa	
PROPOSALS.)	_	OIL CONS. DAY.	Well Number 339	-
1. Type of Well: Oil Well	Gas Well Other	DIST. S		_
2. Name of Operator	ກs Production Company, LLC ັ້	E), (3	7. OGRID Number 120782	
3. Address of Operator	is Froduction Company, LLC	13 to 12 (2)	10. Pool name or Wildcat	-
	OB 640, Aztec, NM 87410	ACCURATE OF THE PROPERTY OF TH	Basin Fruitland Coal	
4. Well Location				-
	: 1135 feet from the N	line and 1075	feet from the E line	
			ounty San Juan	
Section 32	Township 32N Range 06W 11. Elevation (Show whether I		ounty San Juan	
		77' GR		
Pit or Below-grade Tank Application		7 010		
		esh water well >1000 ft	Distance from nearest surface water_>300 ft_	
		-		1
Pit Liner Thickness: 12	mil Below-Grade Tank: Volume _	bbls; Constru	ction Waterial	J
12. Che	ck Appropriate Box to Indicate	Nature of Notice, 1	Report or Other Data	
NOTICE OF	FINTENTION TO:	l cups	REQUENT DEPORT OF	
PERFORM REMEDIAL WORK		REMEDIAL WORK	SEQUENT REPORT OF: C ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A				
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB				
OTHER:		OTHER:		_
			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.				
Workover pit to be located a	oproximately 50 to 75 feet from we	ell head. Pit will be co	onsidered out of service once production	
			guidelines and Williams procedures.	
	•		,	
Therefore and for the table in formation	Aion al anni a tanan di annulata da di	1 C 1 . 1	11 11 6	_
orade tank has been/will be construct	ition above is true and complete to the	e best of my knowledge	e and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan	•
		23, a general permit	in an (accented) accentance OCD-approved plan	
SIGNATURE	TITLE	EH&S Specialist	DATE <u>12/5</u> /05	
7 1 1	I K. Lane E-mail address: my	ke.lane@williams.c	om Telephone No. 505-634-4219	
For State Use Only		THE A CAR HOME	DEC.0 5 20	ጠጠና
APPROVED BY: \) ev	my fair	futt 🕮 & Gas 🕬	DATE	A M.C
Conditions of Approval (if any)	ille		DAIE	
orpp-o-wi (ii wiiy)				