Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103
District I	Energy, Minerals and Natural Resources		May 27, 2004 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II			30-045-31238
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEE
District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	S. St. Francis Dr., Santa Fe, NM		NM-03190
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			_
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			Cox Canyon
1. Type of Well: Oil Well Gas Well Other			8. Well Number 9C
2. Name of Operator			9. OGRID Number
Williams Production Company, LLC			120782
3. Address of Operator PO Box 640, Aztec, NM 87410			Blanco MV
4. Well Location			
Unit Letter F: 1980_feet from the FNL line and 1905_feet from the FWL line			
Section 20 Township 32N Range 11W NMPM County San Juan			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
6711' GR			
Pit or Below-grade Tank Application or Closure			
Pit typeDepth to Groundwater_>100 ft_Distance from nearest fresh water well>3000 ft Distance from nearest surface water>500 ft_			
Pit Liner Thickness: mil	Below-Grade Tank: Volume 120	0bbls: Const	truction Material Double-Wall Steel
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING			
TEMPORARILY ABANDON			
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN			
OTHER:		OTHER:	
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. BGT constructed, operated and closed in accordance with NMOCD guidelines and Williams procedures. DEC 2006 RECEIVED OIL CONS. DOI:			
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further complete to the best of my knowledge and belief.			
grade tank has been/will be constructed or	closed according to NMOCD guidelines	, a general permit	an (attached) alternative CD-approved plan .
SIGNATURE SIGNATURE	TITLE	EH&S Specialist	12/16/05
Type or print name Michael K. Lane E-mail address: myke.lane@williams.com Telephone No. 505-634-4219			
For State Use Only	J H	ean u eva muacisu	TEL EST. (P DEC 16 2005
APPROVED BY: DATE Conditions of Approval (if any):			