| Submit 3 Copies To Appropriate District   | State of New Mexico                    |  | Form C-103  |
|---|--|--|---|
| Office District I   | Energy, Minerals and Natural Resources |  | May 27, 2004                                      |
| 1625 N. French Dr., Hobbs, NM 88240   |  |  | WELL API NO.                                      |
| District II<br>1301 W. Grand Ave., Artesia, NM 88210  | OIL CONSERVATION DIVISION              |  | 30-045-33133                                      |
| District III  | 1220 South St. Francis Dr.             |  | 5. Indicate Type of Lease                         |
| 1000 Rio Brazos Rd., Aztec, NM 87410  | Santa Fe, NM 875050 19 20 21 32        |  | STATE FEE  6. State Oil & Gas Lease No.           |
| <u>District IV</u><br>1220 S. St. Francis Dr., Santa Fe, NM   | Santa PC, TVIVI 07, 5038 (3 (0 )       |  | 6. State Oil & Gas Lease No.                      |
| 87505   |  |  |   |
| SUNDRY NOT  | ICES AND REPORTS ON WELLS              | 2000                                     | ALease Name or Unit Agreement Name                |
| (DO NOT USE THIS FORM FOR PROPO   | DSALS TO DRILL OR TO DEEPEN OR PLI     | UG BACK TO A DO                          |   |
| PROPOSALS.)   | CATION FOR PERMIT" (FORM C-101) FO     | OK SUCH -                                | Rosa  |
| 1. Type of Well: Oil Well   | Gas Well 🛛 Other                       | C. Tan Call                              | Well Number 145B                                  |
| 2. Name of Operator OGRID Number  |  |  |   |
| Williams Production Company, LLC 120782   |  |  |   |
| 3. Address of Operator  |  | S. S | 10. Pool name or Wildcat                          |
|   | x 640, Aztec, NM 87410                 |  | Basin DK/MV                                       |
| 4. Well Location  |  |  |   |
| Unit LetterA :590feet from theFNL _ line and _510 _feet from theFELline   |  |  |   |
| Section 16 Township 31N Range 06W NMPM County San Juan  |  |  |   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)  |  |  |   |
| 6326' GR  |  |  |   |
| Pit or Below-grade Tank Application ⊠ or Closure □  |  |  |   |
| Pit typeDepth to Groundwater_50-100 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-Double Wall & Bottom                                      |  |  |   |
| 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   ALTERING CASING  |  |  |   |
| TEMPORARILY ABANDON   |  |  |   |
| PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   |  |  |   |
| 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.  |  |  |   |
|   |  |  |   |
|   |  |  |   |
|   |  |  |   |
|   |  |  |   |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below- |  |  |   |
| grade tank has been/will be constructed o   | r closed according to NMOCD guidelines | 🛛 , a general permit 🔲                   | or an (attached) alternative OCD-approved plan 🔲. |
| <i>7:41</i>   |  |  |   |
| SIGNATURE   | TITLE_                                 | EH&S Specialist                          | DATE <u>4/13/06</u>                               |
| Tyme or mint name Michael K   | Long E mail address marks              | lana@williama a                          | T.1. 1 N. FOE COA 4040                            |
| Type or print name Michael K. Lane E-mail address: myke.lane@williams.com Telephone No. 505-634-4219  |  |  |   |
| For State Use Only  |  |  |   |
| APPROVED BY: TITLE WITT OR & GAS INSTERIOR, CISI. C. DATE  DATE   |  |  |   |
| APPROVED BY:  | NY TENES TITLE                         | ESTUTA ON PROPERTY IN                    | DATE  |
| Conditions of Approval (if any):  |  |  |   |
| V   |  |  |   |