Submit 3 Copies To Appropriate Distr	ict State of	New Mexico	Form C-103
Office District I	Energy, Minerals	s and Natural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 8824	0		WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88	OIL CONSER	VATION DIVISION	30-039-25425
District III		h St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 874	10	Fe, NM 87505	6. State Oil & Gas Lease No.
District IV 1220 S. St. Francis Dr., Santa Fe, NM		2, 11.1.1 3.2 32	0. State Off & Gas Lease No.
87505			
	IOTICES AND REPORTS O		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PEDIFFERENT RESERVOIR. USE "A	OPOSALS TO DRILL OR TO DEI PPLICATION FOR PERMIT" (FOI	RM C-101) FOR SUCH	Bees
PROPOSALS.)			Rosa
1. Type of Well: Oil Well	Gas Well Other		
2. Name of Operator		JUL 2006	OGRID Number
	ns Production Company	LLC DECENSED	120782
3. Address of Operator	POB 640, Aztec, NM	COL CONS. DIV.	Picture Cliffs
4 777 11 7		DIST. 3	Fictore Onlis
4. Well Location		200	· · · · · · · · · · · · · · · · · · ·
	:_ 1110 feet from the	Sline and157	
Section 15	Township 31N Range		County Rio Arriba
THE MORE STREET, THE	11. Elevation (Show w	whether DR, RKB, RT, GR, etc	
Pit or Below-grade Tank Application	⊠ or Closure □	6148' GR	
			D
		_	_ Distance from nearest surface water_>500 ft_
Pit Liner Thickness: 12	mil Below-Grade Tank:	Volumebbls; Const	ruction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
	INTENTION TO:		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK			-
TEMPORARILY ABANDON	☐ CHANGE PLANS		ILLING OPNS. P AND A
PULL OR ALTER CASING	☐ MULTIPLE COMPL	☐ CASING/CEMEN	II JOB 🔲
OTHER:		☐ OTHER:	П
	completed operations. (Clear		nd 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.			
Mantenan with the best contact of		from well beard. Distance.	
Workover pit to be located approximately 50 to 75 feet from well head. Pit to be used to handle mud and associated waste during P&A operations, and pit will be considered out of service once rig moved off location. Pit to be constructed, operated			
and closed in accordance wi			riocation. Fit to be constitucted, operated
and diodod in doordando w	ar ramood galacimics and	vimanis procedures.	
I hereby certify that the information	ition above is true and compl	ete to the best of my knowled	ge and belief. I further certify that any pit or below-
grade tank has been/will be construc	ed or closed according to NMOCI	D guidelines 🖾, a general permit 🗀	or an (attached) alternative OCD-approved plan .
		_	
SIGNATURE COLLEGE	JX OR	_TITLE <u>EH&S Specialis</u>	t DATE <u>07/06/06</u>
Type or print name Michae	I K. Lane E-mail addre	ess: myke.lane@williams.	com Telephone No. 505-634-4219
For State Use Only		deputy on a gas	INSPECTOR, DIST. &
APPROVED BY: Frankon	Twell-	TITLE	DATE DATE
Conditions of Approval (if any	:		