

Submit 3 Copies
 To Appropriate
 District Office
DISTRICT I
 P.O. Box 1980, Hobbs, NM 88240

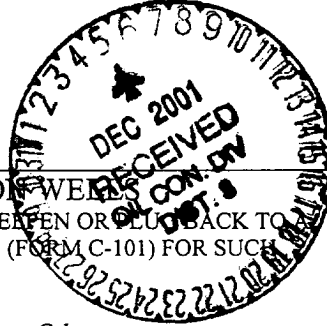
State of New Mexico
 Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

Form C-103
 Revised 1-1-89

DISTRICT II
 811 South First, Artesia NM 88210

DISTRICT III
 1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.	30-045-30816
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	120782
7. Lease Name or Unit Agreement Name:	ROSA UNIT
8. Well No.	167B
9. Pool name or Wildcat	BLANCO MV/BASIN DK



SUNDRY NOTICES AND REPORTS OF WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS)

1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator WILLIAMS PRODUCTION COMPANY	
3. Address of Operator P O BOX 3102, MS 37-2, TULSA, OK 74101	
4. Well Location (Surface) Unit letter <u>B</u> : <u>955</u> feet from the <u>NORTH</u> line & <u>2205</u> feet from the <u>EAST</u> line Sec 08-31N-06W SAN JUAN, NM	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 6219' GR	

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 | CHANGE PLANS | COMMENCE DRILLING OPNS. Spud | PLUG AND ABANDONMENT |
| PULL OR ALTER CASING | | CASING TEST AND CEMENT JOB | |
| OTHER: | | OTHER: | |

12. 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.

This well was spud @ 1700 hrs 11/15/01

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Tracy Ross TITLE: PRODUCTION ANYALST DATE: November 19, 2001

Type or print name TRACY ROSS Telephone No: (918) 573-6254

(This space for State use)

APPROVED **ORIGINAL SIGNED BY CHARLIE T. PEPPIN**

DEPUTY OIL & GAS INSPECTOR, DIST. **DEC - 5 2001**
 BY _____ TITLE _____ DATE _____

Conditions of approval, if any: