

Submit 1 Copy To Appropriate District Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. <b>30-025-10738</b> ✓
5. Indicate Type of Lease <b>FEDERAL</b> STATE <input type="checkbox"/> FEE <input type="checkbox"/> <b>WELL</b>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>Cline Federal</b> ✓
8. Well Number <b>2</b> ✓
9. OGRID Number <b>14372</b>
10. Pool name or Wildcat <b>Langlie Mattix QN Trvrs</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(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.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator  
**McDonnold Operating, Inc.** ✓

3. Address of Operator  
**505 N. Big Spring Suite 204 Midland, Tx 79701**

4. Well Location  
Unit Letter **E** : **2310** feet from the **N** line and **330** feet from the **W** line ✓  
Section **15** Township **23 S** Range **37 E** NMPM **Lea** County **NM**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	INT TO PA <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	P&A NR <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	P&A R <input checked="" type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	OTHER: <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>			

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

5/1/2015 Rigged up and laid down rods.  
5/4/2015 Installed BOP and POOH with tubing. RIH with perforated sub and bull plug and tagged up at 3581'. Circulated MLF and spotted 25 sx class C cement at 3563'. POOH with 20 stands and SION.  
5/5/2015 RIH to tag. No tag at 3563'. Spotted 30 sx class C cement at 3563' with CaCl. WOC 4 hrs and tagged cement at 3362'. POOH to 2551' and spotted 25 sx class C cement. SION  
5/6/2015 RIH and tagged cement at 2363'. Picked up packer and isolated holes in 5 1/2" casing from 628' to 692'. Laid down packer and perforated 5 1/2" casing at 1350'. RIH with packer and squeezed perforations at 1350' with 35 sx class C cement. SION  
5/7/2015 Released packer and tagged cement at 1192'. RIH with packer and set at 313'. Established rate down tubing, below packer to holes from 628' to 692', and up annulus to surface. Mixed 55 sx class C cement with CaCl and squeezed holes. WOC 4 hrs and tagged cement at 548'. Perforated 5 1/2" casing at 60'. Established circulation and pumped cement down 5 1/2" casing to perfs at 60' and up annulus to surface. Took 20 sx to get good cement to surface. Removed BOP and rigged down. Cut off wellhead. Cement had fallen from surface. SION  
5/8/2016 Mixed 20 sx cement and filled up both string of casing with 10 sx. 5 1/2" casing remained full and the annulus between 5 1/2" and 8 5/8" casing was still falling. Pumped remaining 10 sx cement with CaCl down annulus and WOC 3 hrs. Filled up annulus with 5 sx cement. Both strings were full and stable. Installed marker and cut off anchors.

Witnessed by BLM Inspector, Marlon Deaton.

Spud Date:

Rig Release Date:

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

SIGNATURE Craig M. McDonnold TITLE President DATE 2-29-16

Type or print name Craig M. McDonnold E-mail address: \_\_\_\_\_ PHONE: 432-682-3499

For State Use Only

**FOR RECORD ONLY**

mw/ocd 03-03-2016

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any):

MAR 03 2016

*Handwritten signature*