Submit 3 Copies To Appropriate District Office	State of New Mo		Form C-103 March 4, 2004			
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.			
District II	OIL CONGERVATION PROGRAM		30 025 22955			
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of L	ease		
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE X FEE			
District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.			
1220 S. St. Francis Dr., Santa Fe, NM 87505			B-2317			
	CES AND REPORTS ON WELL:		7. Lease Name or Un	it 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.)		OK SOCII	State 35 Unit			
1. Type of Well:		8. Well Number		~		
Oil Well X Gas Well O	ther		13			
2. Name of Operator			9. OGRID Number			
McGowan Working Partners, Inc.			220397			
3. Address of Operator P.O. Box 55809, Jackson MS 39296-5809			10. Pool name or Wildcat Vacuum – Greyburg/San Andres			
	6-3809		vacuum – Greyourg/s	San Andres		
4. Well Location					~	
Unit Letter <u>E</u>	: 2310 feet from the No	orth line and	990 feet from the	West	_line	
Section 35	Township 17S	Range 34E	E NMPM	County	Lea	
	11. Elevation (Show whether DI	R, RKB, RT, GR, etc.)				
Pit or Below-grade Tank Application (Fo	4029' r pit or below-grade tank closures, a forn		<u> </u>	File Sur S. Worth F. P. F. J.		
				t fresh water we	n [
Pit Location: ULSectTwpRngPit typeDepth to GroundwaterDistance from nearest fresh water well Distance from nearest surface waterBelow-grade Tank Location ULSectTwpRng;						
feet from the line and feet from the line						
ieet from thethe and	ieet from thethe				•	
12. Check A	Appropriate Box to Indicate N					
NOTICE OF IN			SEQUENT REPO			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		TERING CAS		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRIL	LLING OPNS. PL	UG AND 17 1	879	
PULL OR ALTER CASING	MULTIPLE	CASING TEST AN	ID X	AMBOINNEIN I	, <u>"</u>	
	COMPLETION	CEMENT JOB	, in	<i>,</i>	<i>'</i>	
OTHER:		OTUED:	101		1	
OTHER:		OTHER:	O			
SEE RULE 1103. For Multiple C	erations. (Clearly state all pertinent details ompletions: Attach wellbore diagram of pr	, and give pertinent dates, onesed completion or reco	mnletion IT	tarting any propo	sed work).	
		•	in large support of the support of t	.164L •		
	Clean out and swab on 5/10, 5/11 & W/ 250 sx 2% sodium nitrate on 5/17		ng, found hole @ 460', od d out cement w/TOC @ 2		217018	
	un production string w/EOT @ 1478' of		n well to service on 5/23/0		400 FON	
I hereby certify that the information					t or below-	
grade tank has been/will be constructed or	closed according to NMOCD guidelines,	, a general permit or an (attached) alternative OCD-	approved pian.		
SIGNATURE	(1) TIT	ΓLE <u>Regulatory</u> (<u>Officer</u>	DATE 1 June	e 05	
_		_	_	·		
Type or print name Glenn Hepne	E-mail address: glen	ın@mcgowanwp.com	n Telephone No.	(601) 987-104	42	
(This space for State use)	. ^					
31						
				FFR 1 a	2.2000	
APPPROVED BY Court Conditions of approval, if any	J. Wind Straight	REPRESENTATIVE I	I/STAFF MANAGEBA		2008 -	