

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N French Dr, Hobbs, NM 88240  
 District II  
 1301 W Grand Ave, Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd, Aztec, NM 87410  
 District IV  
 1220 S St Francis Dr, Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 May 27, 2004

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

WELL API NO. 30-025-11277

5. Indicate Type of Lease  
 STATE  FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name  
Jack A. 29 #2

8. Well Number 2

9. OGRID Number  
14372

10. Pool name or Wildcat  
Langliemattix 7vrs QN EB

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

Pit or Below-grade Tank Application  or Closure

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

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  Injection

2. Name of Operator  
McDonnold Operating, Inc.

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

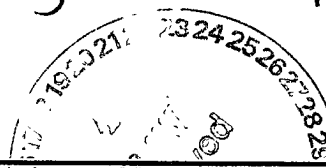
4. Well Location  
 Unit Letter I : 2310 feet from the S line and 330 feet from the E line  
 Section 29 Township 24S Range 37E NMPM Lea County NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

MIRU APS1 Rig. POOH w/ tbg + PKR. Isolate csg 1k from 819-911'. SQ2 w/ 250 sx cmt. DO cmt. csg would not test. Re SQ2 w/ 100sx cmt. DO. R14 w/ 7" Baker AD-1 PKR, circ w/ PKR fluid + set PKR @ 3159'. Press test csg to 380 psig. No drop.



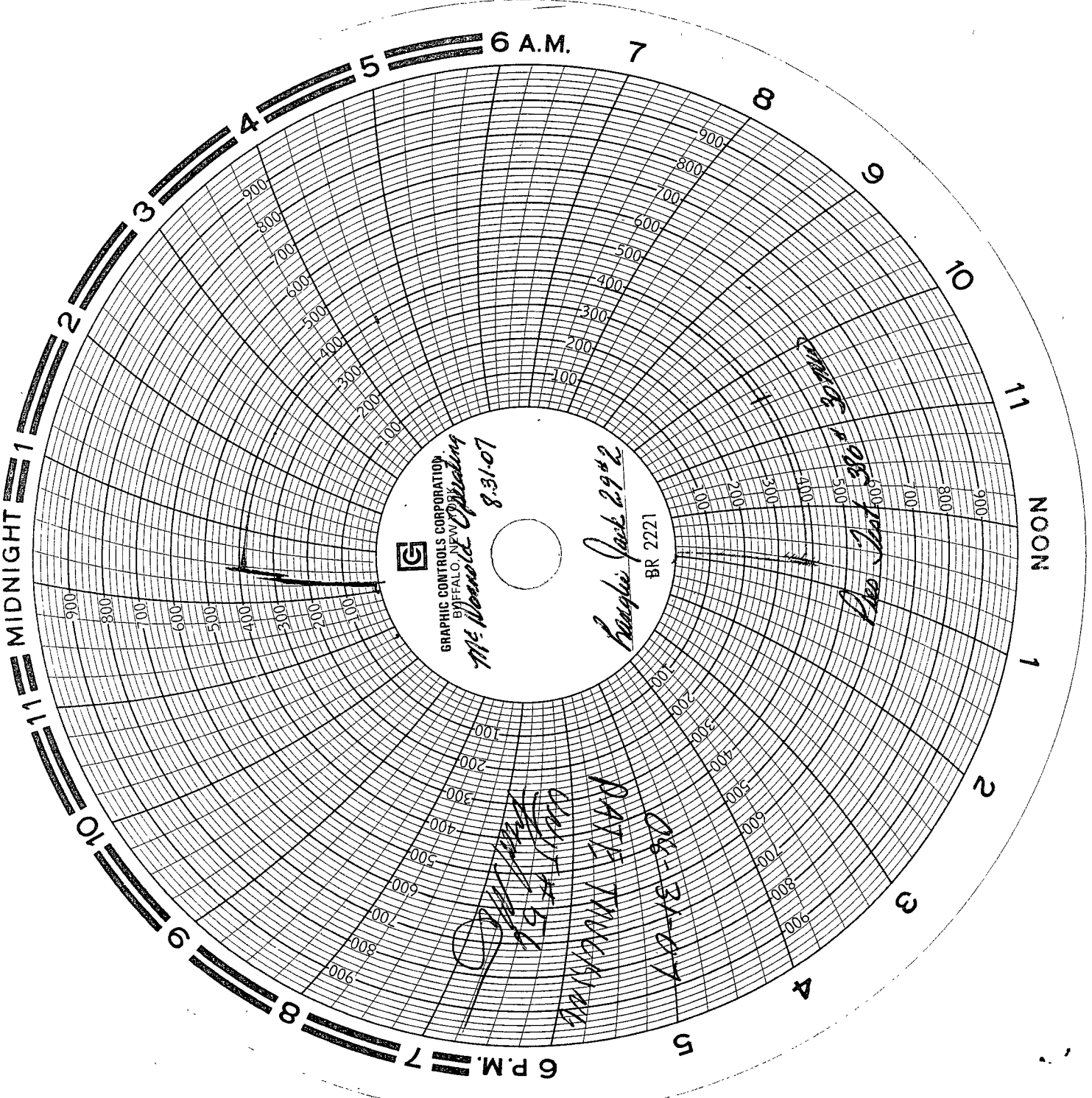
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines  a general permit  or an (attached) alternative OGD-approved plan .

SIGNATURE Craig M. McDonnold TITLE President DATE 9-19-07

Type or print name Craig M. McDonnold Email address: \_\_\_\_\_ Telephone No. 432 682-3499

APPROVED BY: Louise W. Wink TITLE OGC FIELD REPRESENTATIVE / STAFF MANAGER DATE SEP 20 2007

Conditions of Approval (if any):



GRAPHIC CONTROLS CORPORATION  
 BUFFALO, NEW YORK  
*Mr. Harold Operating 8.31.07*

*Sample Sept 29 02*  
 BR 2221

*PAVE THORNTON*  
*OS-BA-07*

*See Chart 3000 3000*

MIDNIGHT 1 2 3 4 5 6 A.M. 7 8 9 10 11 NOON 1 2 3 4 5 6 P.M.