

Submit 3 Copies To Appropriate District
 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

APR 27 2009

Form C-103
 May 27, 2004

RM

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

WELL API NO. 30-015-22907
5. Indicate Type of Lease FEDERAL STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 2029
7. Lease Name or Unit Agreement Name SCHNEIDER
8. Well Number 001
9. OGRID Number 231382
10. Pool name or Wildcat RED LAKE;QUEEN-GRAYBURG-SA

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
STATE OF NM FOR C&D MANAGEMENT CO DBA FREEDOM VENTURES

3. Address of Operator
4801 LANG NE SUITE 110 ALBUQUERQUE, NM 87109

4. Well Location
 Unit Letter J: 2310 feet from the SOUTH line and 1980 feet from the EAST line
 Section 24 Township 17S Range 27E NMPM County EDDY, NM

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 _____

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 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 checked="" 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.

SEE ATTACHMENT

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 NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Mark Hobbs TITLE AGENT DATE 4-24-09

Type or print name _____ E-mail address: _____ Telephone No. _____
For State Use Only

APPROVED BY: [Signature] TITLE _____ DATE 7/30/09
 Conditions of Approval (if any): _____

Approved for plugging of well bore only.
 Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms. www.emnrd.state.nm.us/oed.



Case 14055 De Novo
 C&D Management Company
 dba Freedom Ventures Company
 OCD Exhibit 72

MAYO MARRS CASING PULLING INC.
BOX 863
KERMIT, TEXAS 79745

NM0CD

Lease: NM0CD FOR C & D MANAGEMENT
Project: SCHNEIDER # 1

4/1/2009

CIBP @ 1383' - SPOT 25 SACKS ON TOP

4/2/2009

PERF @ 563' - PUMP 35 SACKS - TAG @ 463'
PERF @ 60' - CIRCULATE 40 SACKS TO SURFACE

PUMPED PLUGGING MUD BETWEEN ALL PLUGS
INSTALLED DRY HOLE MARKER