Submit 3 Copies To Appropriate District	tate of New Mexico	Form C-103
Office District I Energy, N	finerals and Natural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CO	NSERVATION DIVISION	30-015-00683
District III 122	0 South St. Francis Dr.	5. Indicate Type of Lease STATE ☑ FEE □
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE 6. State Oil & Gas Lease No.
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Salita I C, INIVI 87303	B-752-2
87505		D-732-2
SUNDRY NOTICES AND REPO (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OF DIFFERENT RESERVOIR. USE "APPLICATION FOR PERM PROPOSALS.)	TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name SOUTH RED LAKE II UNIT
1. Type of Well: Oil Well Gas Well O	ther RECEIVED	8. Well Number 28
2. Name of Operator	HECEIVED	9. OGRID Number
McQuadrangle, L.C.	MAR O I 2005	7. OSTAD MAMOO
3. Address of Operator		10. Pool name or Wildcat
7008 Salem, Lubbock, Texas	5 79424 OCHEMATERIA	QUEEN GRAYBURG, SA
4. Well Location		
Unit Letter N: 965 feet from the South line and 1650 feet from the WEST line		
Section 36 Township 17-S Range 27-E NMPM County: Eddy 11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
11. Elevation (Show whether DR, RRD, R1, OR, 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		
	Tank: Volumebbls; Const	
12. Check Appropriate Bo	ox to Indicate Nature of Notice, l	Report or Other Data
NOTICE OF INTENTION TO	0.110	SECUENT DEPORT OF
NOTICE OF INTENTION TO		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A		
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ CASING/CEMENT JOB ☐		
OTHER: WELL NAME CHANGE 🗵 OTHER:		
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.		
1		
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-
Brane the man been prompt acted of closed according to		or an (attached) alternative OCD-approved plan .
1 as De surf	NMOCD guidelines , a general permit	or an (attached) alternative OCD-approved plan .
SIGNATURE COLOR A MONTO		or an (attached) alternative OCD-approved plan DATE 2-32-05
SIGNATURE BOLE A MOST	NMOCD guidelines , a general permit TITLE	DATE 2-22-05
Type or print name Delbert McDougal	NMOCD guidelines , a general permit TITLE	
Type or print name For State Use Only Delbert McDougal IIM W. GUN	NMOCD guidelines , a general permit TITLE E-mail address:	DATE 2-22-05 Telephone No. (806)797-3164
Type or print name Delbert McDougal	NMOCD guidelines , a general permit TITLE E-mail address:	DATE 2-22-05