Office		ew Mexico	Form C-103
District I	Energy, Minerals ar	nd Natural Resources	March 4, 2004
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API NO. 30 025 28059	
1301 W. Grand Ave., Artesia, NM 88210	1220 South St. Francis Dr.		5. Indicate Type of Lease
District III			STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM		0.	B-2317
87505 SLINDRY NOTIC	CES AND REPORTS ON	WEIIS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOS			7. Loase Name of Ome Agreement Name
	DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		
1. Type of Well:			8. Well Number
Oil Well Gas Well Other	er X(WIW)		17
2. Name of Operator		·	9. OGRID Number
McGowan Working Partners, Inc.		•	220397
3. Address of Operator		;	10. Pool name or Wildcat
P.O. Box 55809, Jackson MS 39296	5-5809		Vacuum - Greyburg/San Andres
4. Well Location	······································		
·			
Unit Letter J:	2360 feet from the	South line and	1330 feet from the East line
		150 %	247
Section 35	Township 11. Elevation (Show when	17S Range	
	11. Elevation (Snow when	iner DK, KKB, KI, GK,	etc.)
Pit or Below-grade Tank Application (For	pit or below-grade tank closure	es. a form C-144 must be att	ached)
Pit Location: ULSectTwp_		· · · · · · · · · · · · · · · · · · ·	terDistance from nearest fresh water well
		-	
Distance from nearest surface water			.Twp,
feet from theline and	feet from thel	ine	
12. Check A NOTICE OF IN PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING	TENTION TO:	REMEDIAL W	
OTHER:		OTHER:	
	(0) 1		- 1 -i
of starting any proposed wo or recompletion.	rk). SEE RULE 1103. Foi	r Multiple Completions	, and give pertinent dates, including estimated date Attach wellbore diagram of proposed completion
 Pulled tubing & packer to inspect. Ran original tubing and new packer. Completed/passed MIPT on 4/1 	acker to previous configuration	n (depths) on 3/25/05.	
I haraby cartify that the information	shove is true and complete	to the hest of my know	ledge and belief. I further certify that any pit or below-
grade tank has been/will be constructed or	closed according to NMOCD gu	idelines, a general permit o	r an (attached) alternative OCD-approved plan.
SIGNATURE SIGNATURE		ITLE <u>Regulatory O</u>	
Towns and wint name Class However	T mail address	a. alama@magasiyansy	o.com Telephone No. (601) 982-3444
Type or print name Glenn Hepner	E-mail addres	s: glenn@mcgowanwp	o.com Telephone No. (601) 982-3444
(This space for State use)			
APPPROVED BY Laugh	Wine TI	TLE	DATE
<u> </u>). Umb_TI	TLEELD REPRESENTATIVE	DATE DATE SEP 2 6 2005

