

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Minerals and Natural Resources
HOBBS OGD
DEC 26 2012
RECEIVED
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised August 1, 2011

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.)		WELL API NO. 30-02511279
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> <u>Injection</u>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> <u>Fed</u>
2. Name of Operator <u>McDonnold Operating, Inc.</u>		6. State Oil & Gas Lease No. <u>010018</u>
3. Address of Operator <u>505 N. Big Spring, Suite 204, Midland, Tx 79701</u>		7. Lease Name or Unit Agreement Name <u>Jack A 29</u>
4. Well Location Unit Letter <u>O</u> : <u>990</u> feet from the <u>S</u> line and <u>1650</u> feet from the <u>E</u> line Section <u>29</u> Township <u>24S</u> Range <u>37E</u> NMPM <u>Lea</u> County <u>NM</u>		8. Well Number <u>4</u> 9. OGRID Number <u>14372</u> 10. Pool name or Wildcat
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input checked="" type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1. RU SQ2-Tec. Pmp 10 gals SQ2 Compound dn CSG.
 Press csg to 500 psi. Left press on csg for 36 hrs.
 2. Call OCD & retest to 420psi. Mark Whitaker w/
 OCD witnessed test.
 Will need to retest in 12 months.

Spud Date: Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Craig M. McDonnold TITLE President DATE 12-11-12
 Type or print name Craig M. McDonnold E-mail address: _____ PHONE: 432-682-3499
For State Use Only
 APPROVED BY: Mark Whitaker TITLE Compliance Officer DATE 12-27-2012
 Conditions of Approval (if any):

JAN 08 2013 *dm*

HOBBS OCD

DEC 26 2012

RECEIVED

6 P.M.

DEC 11 2012

HOBBS OCD

RECEIVED

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

BR 2221

NOON 1 2 3

MIDNIGHT

6 A.M.

