

Submit 1 Copy 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
 Minerals and Natural Resources

Form C-103
 October 13, 2009

HOBBSON
 DEC 26 2014
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
 RECEIVED

WELL API NO. 30-025-23112	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No. 890082510	
7. Lease Name or Unit Agreement Name Langlie Mattix Woolworth Unit	
8. Well Number 204	
9. OGRID Number 149981	
10. Pool name or Wildcat Lanlgie Mattix 7-Rvs-Qn-Grb	
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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> <u>Injection</u>	
2. Name of Operator Midland Operating, Inc.	
3. Address of Operator PO Box 52308, Midland, Texas 79710	
4. Well Location Unit Letter <u>M</u> : <u>330</u> feet from the <u>South</u> line and <u>330</u> feet from the <u>West</u> line Section <u>28</u> Township <u>24S</u> Range <u>37E</u> NMPM County <u>Lea</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3287 DF	

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

E-PERMITTING P&A NR _____ P&A R _____ <input type="checkbox"/> INT TO P&A _____ <input type="checkbox"/> CSNG _____ Chng Loc _____ <input type="checkbox"/> <u>TA P-m PBAMS chart</u> <input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input 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 checked="" 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.

11-3-2014: Well passed required MIT, see attached chart

This approval of Temporary Abandonment Expires 5/3/2015

6 month Extension Final Extension
 TA Expired 2/22/2010

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 Victor J. Sirgo TITLE President DATE 11-3-14

Type or print name Victor J. Sirgo E-mail address: vjsirgo@sbcglobal.net PHONE: 432-638-5551

APPROVED BY: Bill Semanah TITLE Staff Manager DATE 11/2/2015

Conditions of Approval (if any):

JAN 07 2015

