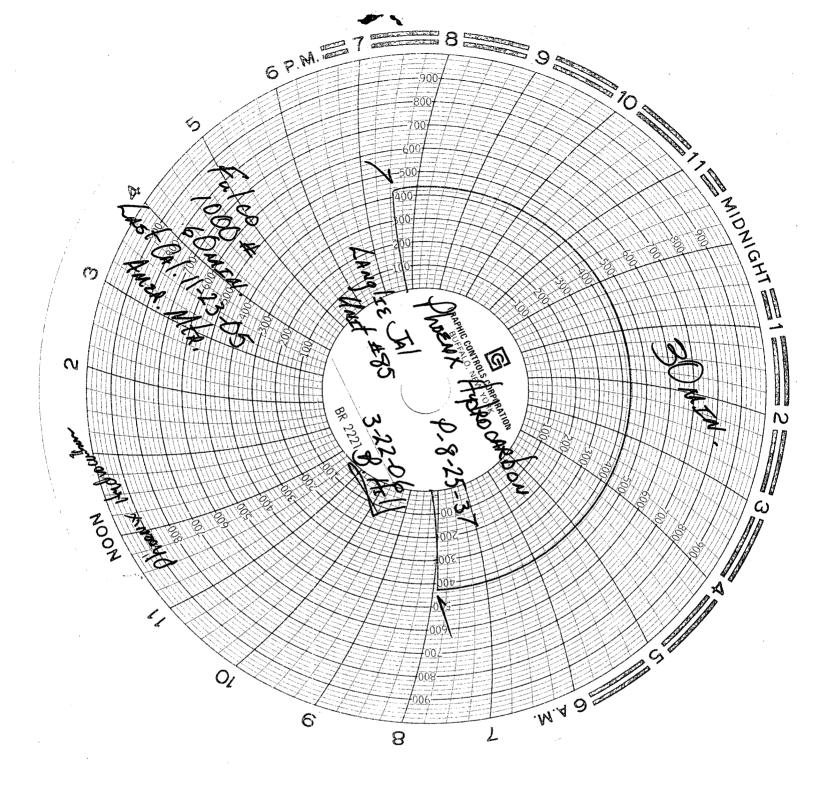
Submit 3 Copies To Appropriate District	State of New Me	xico	Form C-103	
Office District I	Energy, Minerals and Natural Resources		May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II	OIL CONCEDIATION DIVISION		30-025-11493	
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of Lease FEDER	
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		STATE FEE	<u></u>
District IV	LIV		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505				
SUNDRY NOTI	CES AND REPORTS ON WELLS		7. Lease Name or Unit Agreemen	t Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		LANGLIE JAL UNIT		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)				
1. Type of Well: Oil Well Gas Well Other INJECTOR			8. Well Number 085	
2. Name of Operator			9. OGRID Number 188483	
PHOENIX HYDROCARBONS OPERATING CORPORATION				
3. Address of Operator			10. Pool name or Wildcat LANG	LIE
P O BOX 3638, MIDLAND, TX 79702			MATTIX, 7 RVRSQ	
4. Well Location				
Unit Letter P: 660	feet from theSOUTH line	and 660 fee	t from theEASTline	
Section 8			NMPM LEA County NM	
	11. Elevation (Show whether DR,			
	3162 DR			
Pit or Below-grade Tank Application 🔲 o	or Closure 🔲			
Pit type Depth to Groundw	aterDistance from nearest fresh	water well Di	stance from nearest surface water	[
Pit Liner Thickness: mil	Below-Grade Tank: Volume	bbls; C	onstruction Material	
<u> </u>	Appropriate Box to Indicate N	ature of Notice	Report or Other Data	
12. CHECK A	Appropriate Box to indicate in	ature or motice,	Report of Other Data	
NOTICE OF IN	ITENTION TO:	SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON 🔲	REMEDIAL WOR	K	SING 🗌
TEMPORARILY ABANDON		COMMENCE DRI	LLING OPNS.□ P AND A	
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN	T JOB 🔲	
OTHER DEACTIVATE	\	OTHER: MIT TES	eT.	, N
OTHER: REACTIVATE	leted operations (Clearly state all t		d give pertinent dates, including esti	mated date
of starting any proposed we	ork). SEE RULE 1103. For Multip	le Completions: At	tach wellbore diagram of proposed of	completion
or recompletion.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	r		F
1				
3/22/06 PRESSURE TESTED WE				WITH
OCD. THIS WELL WILI	BE ACTIVATED AND PUT BAC	CK INTO INJECTO	OR STATUS.	
		1.6% V	9202123	
		677		
		12/20	fina E	
		14 14 14 14 14 14 14 14 14 14 14 14 14 1	sqoor g	
I hereby certify that the information	above is true and complete to the be	est of my knowledge	and belief. I further certify that any p	it or below-
grade tank has been/will be constructed or	r closed according to NMOCD guidelines	☐, a general permit. ☐	or an (attached) afternative OCD-appro	ved plan □.
CICNIATURE	A PARTIES	AGENT	A) / A) / A / A / A / A / A / A / A / A	
SIGNATURE	dilli- Alleny	AUDINI	DATE 4/3/06	
Type or print name Phyllis R. Gun	ter E-mail address: PHYGUN	AOL COM	FLARHER FAARS WARRAGER	
For State Use Only	1 , 1 , 1	TIELD KERKESEN	ADE	1 0 0 0000
APPROVED BY:	1 1 1 7 11		Dr.	(() h ////ih
	J. Wink TITLE		DATE	R O 6 2006
Conditions of Approval (if any).	U-Wink TITLE		DATEAFF	(0 b 200b



Sent: Thu 4/6/2006 11:05 AM

The sender of this message has requested a read receipt. Click here to send a receipt.

Mull, Donna, EMNRD

From:

Phillips, Dorothy, EMNRD

To:

Mull, Donna, EMNRD

Cc:

Subject:

RE: Financial Assurance Requirement

Attachments:

They have a blanket and do not appear on Jane's list.

From: Mull, Donna, EMNRD

Sent: Thursday, April 06, 2006 9:23 AM

To: Phillips, Dorothy, EMNRD

Cc: Macquesten, Gail, EMNRD; Sanchez, Daniel J., EMNRD

Subject: Financial Assurance Requirement

Dorothy,

Is the Financial Assurance Requirement OK for:

Phoenix Hydrocarbons Operating Corp (188483)