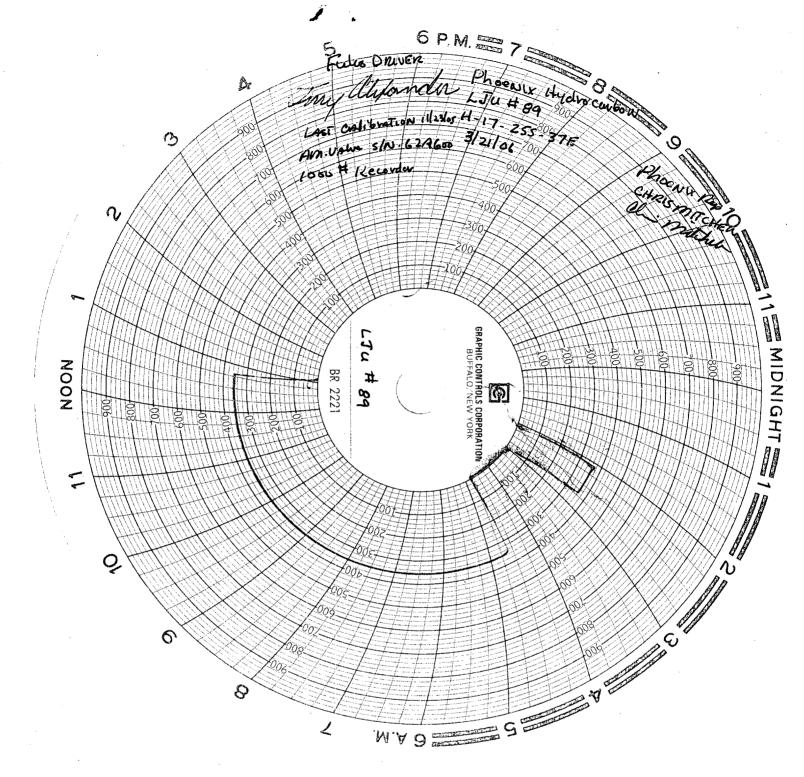


Submit 3 Copies To Appropriate District Office State of New Mexico Missenda and Netural Recourses	Form C-103 May 27, 2004
District I Energy, Winerais and Natural Resources	WELL API NO.
District II OIL CONSERVATION DIVISION	30-025-11630
District III 1220 South St. Francis Dr.	5. Indicate Type of Lease FEDERAL X STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	
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	7. Lease Name or Unit Agreement Name LANGLIE JAL UNIT
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other INJECTOR	8. Well Number 089
2. Name of Operator	9. OGRID Number 188483
PHOENIX HYDROCARBONS OPERATING CORPORATION	10. Pool name or Wildcat LANGLIE
3. Address of Operator P O BOX 3638, MIDLAND, TX 79702	MATTIX, 7 RVRSQ
4. Well Location	fort from the FAST line
Unit Letter H: 1980 feet from the NORTH line and 660	feet from the _EASTline NMPM
Section 17 Township 25S Range 37E 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
3132 DR	
Pit or Below-grade Tank Application □ or Closure □ Pit type □ Depth to Groundwater □ Distance from nearest fresh water well □ Distance fresh	stance from nearest surface water
	Construction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR	K
OTHER: REACTIVATE OTHER: MIT TE	est 🗖
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.	
3/22/06 PRESSURE TESTED WELL AS PER ATTACHED CHART, PACKER @ 3200'. APPROVED BY BUDDY HILL WITH	
OCD. THIS WELL WILL BE ACTIVATED AND PUT BACK INTO INJECTOR STATUS.	
	2732
	65.00.22.22.20.20
	(B)
	18. 18. 18. 18. 18. 18. 18. 18. 18. 18.
	14 COL 100 - 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-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.	
SIGNATURE PAULS A CHARLETTLE AGENT	DATE4 <u>/3/06</u>
Type or print name Phyllis R. Gunter E-mail address: PHYGONGEROD REPRESENTATIVE IN STAFF MANAGER	
For State Use Only	
APPROVED BY:	DATEAPR_0_6_2006



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)