

Submit 3 Copies 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
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-11633
5. Indicate Type of Lease <input checked="" type="checkbox"/> FEDERAL STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name LANGLIE JAL UNIT
8. Well Number 093 WWW
9. OGRID Number 188483
10. Pool name or Wildcat LANGLIE MATTIX, 7 RYRSQ
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3200 GR
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: REACTIVATE ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: MIT TEST ☒

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 @ 3150'. APPROVED BY BUDDY HILL WITH
OCD. THIS WELL WILL BE ACTIVATED AND PUT BACK INTO INJECTOR STATUS.

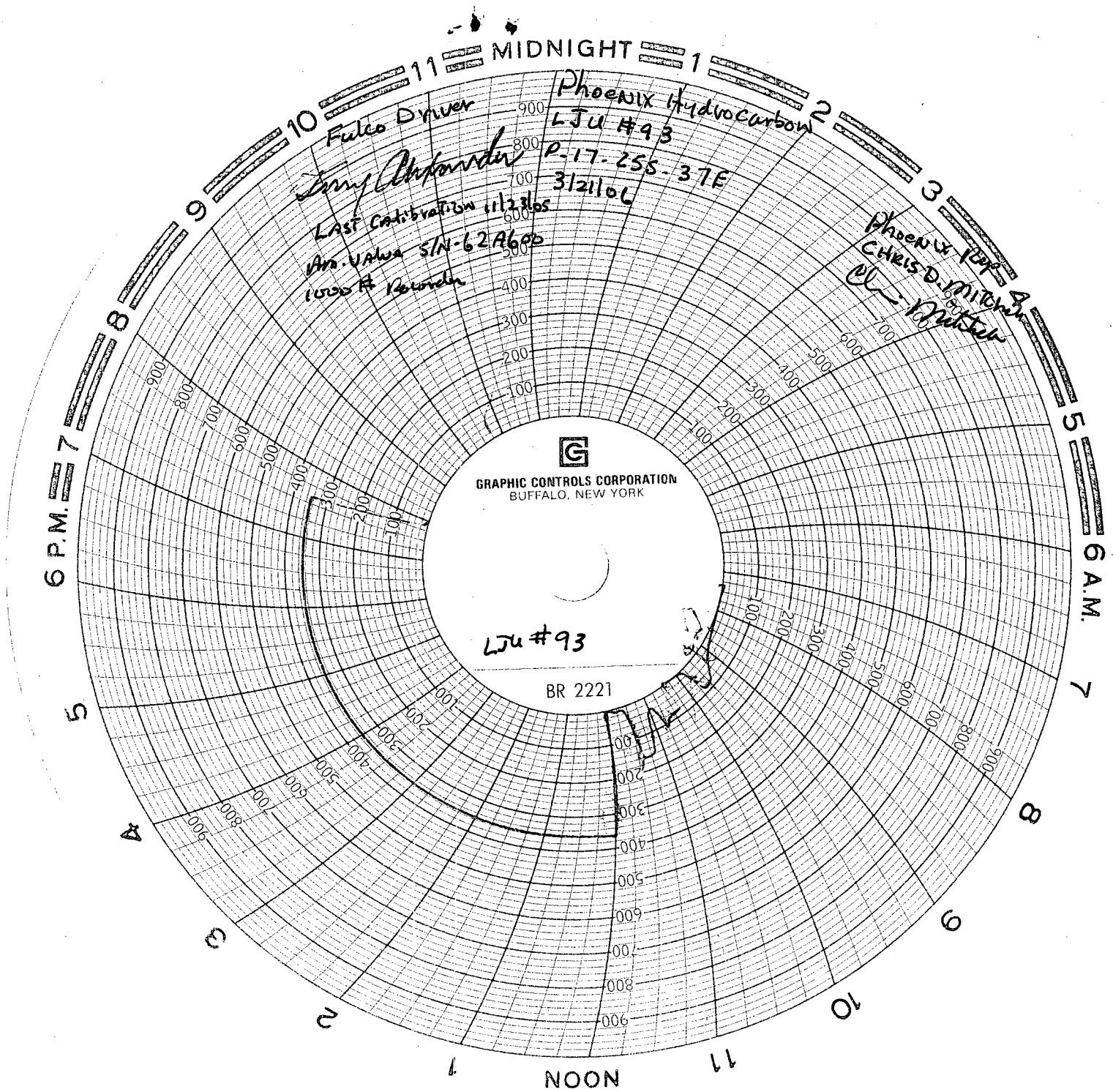
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.


SIGNATURE Phyllis R. Gunter TITLE _____ AGENT _____ DATE 4/3/06

Type or print name Phyllis R. Gunter E-mail address: PHYGUN@AOL.COM Telephone No. 432-686-9869

For State Use Only
APPROVED BY: Harry W. Wink TITLE FIELD REPRESENTATIVE II/STAFF MANAGER
Conditions of Approval (if any) _____ DATE _____

APR 06 2006



 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:

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

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)