

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

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

Form C-103

May 27, 2004

WELL API NO. 30-025-23686 868
5. Indicate Type of Lease FEDERAL STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name LANGLIE JAL UNIT
8. Well Number 049 WIW
9. OGRID Number 188483
10. Pool name or Wildcat LANGLIE MATTIX, 7 RVRSQ

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 ☐ Gas Well ☒ Other INJECTOR

2. Name of Operator
PHOENIX HYDROCARBONS OPERATING CORPORATION

3. Address of Operator
P O BOX 3638, MIDLAND, TX 79702

4. Well Location

Unit Letter H : 1980 feet from the NORTH line and 510 feet from the EAST line
Section 6 Township 25S Range 37E NMPM LEA County NM

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3229 GR

Pit or Below-grade Tank Application ☐ or Closure ☐

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: EVALUATE ☒

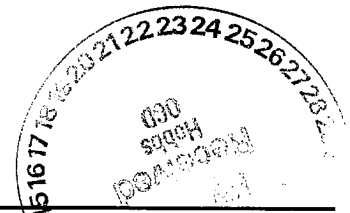
SUBSEQUENT REPORT OF:

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, FAILED, REQUESTING 6 MONTHS TO GET WITH WI OWNERS TO FORMULATE A PLAN TO RETURN THIS WELL TO INJECTION STATUS OR PLUG.



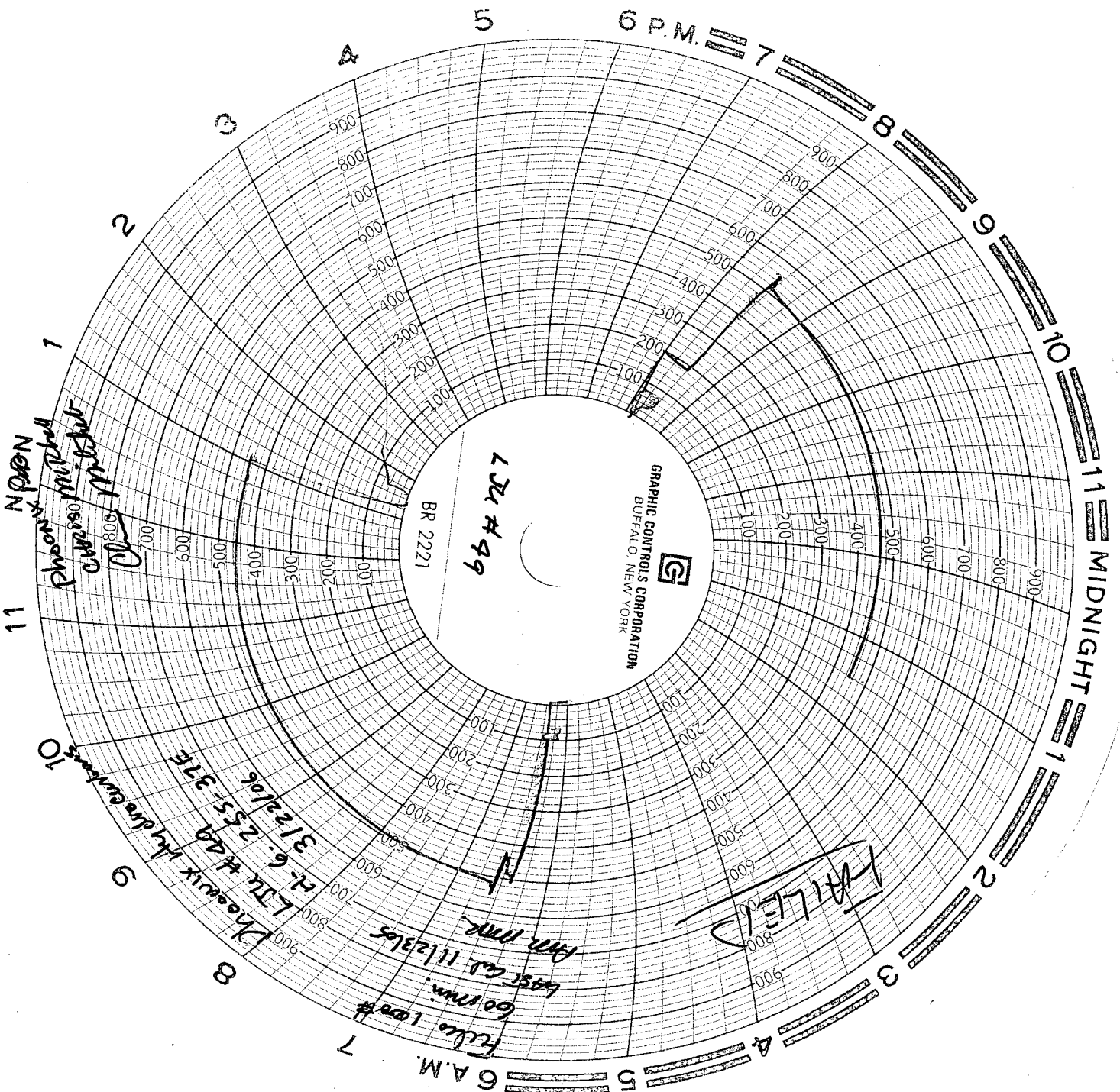
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.


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. 432-686-9849 **APR 06 2006**

For State Use Only
APPROVED BY: Larry W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE _____

Conditions of Approval (if any):



 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)