| · · · ·                                                                                                                                                                                                                                                                                                      |                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Submit 3 Copies To Appropriate District State of New Mexico                                                                                                                                                                                                                                                  | Form C-103                                               |
| Office Energy, Minerals and Natural Resources                                                                                                                                                                                                                                                                | May 27, 2004                                             |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II                                                                                                                                                                                                                                                           | WELL API NO.<br>30-025-24879                             |
| 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION                                                                                                                                                                                                                                              | 5. Indicate Type of Lease FEDERAL                        |
| District III<br>1000 Rio Brazos Rd., Aztec, NM 87410<br>1000 Rio Brazos Rd., Aztec, NM 87410                                                                                                                                                                                                                 | STATE FEE                                                |
| District IV<br>1220 S. St. Francis Dr., Santa Fe, NM                                                                                                                                                                                                                                                         | 6. State Oil & Gas Lease No.                             |
| 87505                                                                                                                                                                                                                                                                                                        |                                                          |
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A<br>DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH                                                                                                                | 7. Lease Name or Unit Agreement Name<br>LANGLIE JAL UNIT |
| PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other INJECTOR                                                                                                                                                                                                                                                | 8. Well Number 060 WIW                                   |
| 2. Name of Operator                                                                                                                                                                                                                                                                                          | 9. OGRID Number 188483                                   |
| PHOENIX HYDROCARBONS OPERATING CORPORATION                                                                                                                                                                                                                                                                   |                                                          |
| <ul><li>3. Address of Operator</li><li>P O BOX 3638, MIDLAND, TX 79702</li></ul>                                                                                                                                                                                                                             | 10. Pool name or Wildcat LANGLIE<br>MATTIX, 7 RVRSQ      |
|                                                                                                                                                                                                                                                                                                              |                                                          |
| 4. Well Location<br>Unit Letter I : 1830 feet from the SOUTH line and 660                                                                                                                                                                                                                                    | feet from the EAST line                                  |
|                                                                                                                                                                                                                                                                                                              | NMPM LEA County NM                                       |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)                                                                                                                                                                                                                                                           |                                                          |
| 3220 GR                                                                                                                                                                                                                                                                                                      |                                                          |
| Pit or Below-grade Tank Application or Closure                                                                                                                                                                                                                                                               |                                                          |
|                                                                                                                                                                                                                                                                                                              | tance 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:<br>PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING                                                                                                                                                                                                              |                                                          |
|                                                                                                                                                                                                                                                                                                              |                                                          |
|                                                                                                                                                                                                                                                                                                              |                                                          |
| PULL OR ALTER CASING DIMULTIPLE COMPL CASING/CEMENT                                                                                                                                                                                                                                                          |                                                          |
| OTHER RETURN TO INJECTOR                                                                                                                                                                                                                                                                                     | No to                |
| 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.                                                                                                                                                                                                                                                                                             |                                                          |
|                                                                                                                                                                                                                                                                                                              |                                                          |
| 9/17/06 MIRU; release pkr and POOH w/tbg; TIH w/bit & scrapper to 3729'; POOH; TIH w/redressed pkr & set @ 3357', test tbg going into hole; RD WO pump truck; load backside & press test; small leak on wellhead. (PERFS @ 3425' TO                                                                          |                                                          |
| 3724').                                                                                                                                                                                                                                                                                                      |                                                          |
| 9/21/06 Tighten "dog nut" on wellhead; WO pump truck.                                                                                                                                                                                                                                                        |                                                          |
| 9/27/06 Press test backside; leaked off 100# in 25 min; WO rig for polymer squeeze.                                                                                                                                                                                                                          |                                                          |
| 10/30/06 POOH w/pkr; TIH & set BP @1056'; TIH w/pkr to 1030' & spot 6 bbls Gel Tech<br>polymer; set pkr @ 545' & squeezed polymer into small leak; TIH circulate out                                                                                                                                         | nolymer pressure up on squeeze and                       |
| 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 of relow-<br>grade tank has been/will be constructed or closed according to NMOCD guidelines ], a general permit ] or an (attached) alternative QCPrapproved plan ]. |                                                          |
| 11/15/06 Notified Buddy Hill of MIT; not able to witness test.                                                                                                                                                                                                                                               | 19202                                                    |
| 11/16/06 Pressure tested well as per attached chart, passed with less than 10% loss. Return well to injector.                                                                                                                                                                                                |                                                          |
|                                                                                                                                                                                                                                                                                                              |                                                          |
|                                                                                                                                                                                                                                                                                                              |                                                          |
| 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 of elow-                                                                                                                                                             |                                                          |
| grade tank has been/will be constructed or closed according to NMOCD guidelines $\Box$ , a general permit $\Box$ or an (attached) alternative <b>CD</b> <sub>2</sub> approved plan $\Box$ .                                                                                                                  |                                                          |
|                                                                                                                                                                                                                                                                                                              | 101687834514                                             |
|                                                                                                                                                                                                                                                                                                              | 02997                                                    |
| SIGNATURE Phyllis R Sunter TITLE AGENT                                                                                                                                                                                                                                                                       | DATE11/22/06                                             |
| Type or print name Phyllis R. Gunter E-mail address: PHYGUN@AOL.COM Telephone No. 432-686-9869<br>For State Use Only                                                                                                                                                                                         |                                                          |
| APPROVED BY: Tau WWW OF HER DEPOPERENTATIVE INSTAFF MANAGEDATEORC 0 7 2006                                                                                                                                                                                                                                   |                                                          |
| Conditions of Approval (if any):                                                                                                                                                                                                                                                                             | IL/STAFF MANAGE DATE DEC 0 7 2006                        |



