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Submit 3 Copies To Appropriate District	State	of New Mexico	Form C-103
Office District I		als and Natural Resources	May 27, 2004
1625 N French Dr., Hobbs, NM 88240 District II	OH CONGE		WELL API NO.
1301 W Grand Ave , Artesia, NM 88210 District III		RVATION DIVISION uth St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd, Aztec, NM 87410		Fe, NM 87505	STATE FEE
District IV 1220 S. St Francis Dr , Santa Fe, NM	Santa	1 0, 14141 0 / 303	6. State Oil & Gas Lease No.
87505 SUNDRY NOTICE	ES AND REPORTS	ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSAL	LS TO DRILL OR TO D	EEPEN OR PLUG BACK TO A	
DIFFERENT RESERVOIR. USE "APPLICA" PROPOSALS)	ΓΙΟΝ FOR PERMIT" (F		Langlie Jack
1. Type of Well: Oil Well Gas Well Other Thechon			8. Well Number
2. Name of Operator McDonnold Operating Inc.			9. OGRID Number
	Big Spring, S		10. Pool name or Wildcat
Midland. 7	x 79701		Langle Mattix Tryis ON GE
4. Well Location	230	A.(
Unit Letter H : 3	feet from the		330 feet from the E line
		Nange 37 E Whether DR, RKB, RT, GR, et	NMPM Lea County NM
	·	Themor Dit, 10th, 11, Oh, C	3 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -
Pit or Below-grade Tank Application or C			
Pit type Depth to Groundwater Pit Liner Thickness: mil			Distance from nearest surface water
	Below-Grade Tank:		Construction Material
12. Check Ap	propriate Box to	Indicate Nature of Notice	e, Report or Other Data
NOTICE OF INTE			BSEQUENT REPORT OF:
	PLUG AND ABANDO CHANGE PLANS		-
, =	MULTIPLE COMPL	☐ COMMENCE D	
OTHER:		_	_
	ed operations. (Clea	OTHER:	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.	•		- 31 - 11 0.1
MIRU Joes WS	. Rel PKR	1 4 9004. LD	23/8 CL +bg. RIH
11 512 Propos	AD-I PC	PKR on 23/x	PC +bg. Circ PKR
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617.3	- 20g		
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SEP SEP	, 26/		
SEP	25		
I hereby certify that the information abo	ve is true and comp	lete to the best of my knowled	ge and belief. I further certify that any pit or below-
C . Pshaze	ea according to NMOC	^	or an (attached) alternative OCD-approved plan .
Sieranie Constitution		TITLE President	DATE 917-07
Type or print name Crais M. N	nconnola	E-mail address:	Telenhana Na
For State Use Only			Telephone No. 432-682-349 9
APPROVED BY: LOWW.	1 Santo	OC PRELD REPRESENTA:	TIVE ILISTAIT MANADATE SEP 2 0 200
Conditions of Approval (if any):	C CIVION	_TIŢLE	DATE SEP 2 0 200
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