

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

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.)		WELL API NO. 30-025-11311
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other WATER INJECTION		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator PHOENIX HYDROCARBONS OPERATING CORP		6. State Oil & Gas Lease No. B 148-18
3. Address of Operator P O BOX 3638, MIDLAND, TX 79702		7. Lease Name or Unit Agreement Name Langlie Jal Unit
4. Well Location Unit Letter D : 990 feet from the NORTH line and 660 feet from the WEST line Section 32 Township 24S Range 37E NMPM LEA County NM		8. Well Number 3
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3252' GR		9. OGRID Number 188483
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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

Approval to temporarily abandon well, April 2008, for potential future injection/production. CIBP plug is set +/- 3250'.

1. Notify district office 24 hours prior to pressure test.
2. Pressure test casing to 500psi for 30 minutes according to Rule 203.

RECEIVED

APR 02 2008

HOBBS OCD

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 Billy Sneed TITLE Engineering Consultant DATE 3/24/08

Type or print name Billy Sneed

E-mail address: bsneed@phocmid.com Telephone No. 432-686-9869

For State Use Only

APPROVED BY: [Signature] TITLE Geologist

DATE APR 11 2008

Conditions of Approval (if any):

Conditions of Approval: Notify OCD district office
24 hours prior to running the TA pressure test.