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Conditions of approval, if any:

Submit 3 Copies To Appropriate District OBBSOCD Office State of New Mexico Form C-103 March 4, 2004 Energy, Minerals and Natural Resources District I WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 District II 30 025 28062 OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease District III 1220 South St. Francis Dr. STATE E FEE X 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 6. State Oil & Gas Lease No. District IV 1220 S. St. Francis Dr., Santa Fe, NM B-2317 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name (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 SUCII State 35 Unit PROPOSALS) 8. Well Number, 1. Type of Well: 37 Oil Well Gas Well Other X (WIW) 9. OGRID Number 2. Name of Operator McGowan Working Partners, Inc. 220397 3. Address of Operator 10. Pool name or Wildcat P.O. Box 55809, Jackson MS 39296-5809 Vacuum – Greyburg/San Andres 4. Well Location Unit Letter P: 10 feet from the South line and 1210 feet from the Township 17S Range **NMPM** County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4010' GR Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached) Pit Location: UL P Sect 35 Twp 17 Rng 34 Pit type lined 12 mil Depth to Groundwater 160 Distance from nearest fresh water well >1000' Distance from nearest surface water >1000' Below-grade Tank Location UL Sect Twp Rng feet from the \_\_\_\_\_line and \_\_\_\_\_feet from the \_\_\_\_\_line 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK X PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND **ABANDONMENT** PULL OR ALTER CASING **MULTIPLE** CASING TEST AND COMPLETION **CEMENT JOB** OTHER: OTHER: 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 Pull injection tubing & packer. 1 2. Inspect and repair tubing and casing as required. 3. Run injection tubing & packer, EOT @ +/- 4300' & PKR @ +/- 4300' (same as previous). Perform witnessed MIT & return to service. 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 belowgrade tank has been/will be constructed or closed according to NMOCD guidelines, a general permit or an (attached) alternative OCD-approved plan. SIGNATURE TITLE Regulatory Officer DATE 2 Feb 10 Type or print name Glenn Hepner E-mail address: glenn@mcgowanwp.com Telephone No. CE PELD REPRESENTANY DOUSTAFT MAMAGES (This space for State use) APPPROVED BY DATE 2-3-10