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(Introduction of the control of the	
Submit One Copy To Appropriate District SOCD State of New Mexico Office Minerals and Natural Resources	Form C-103
District I 1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION	30-025-11336
District III 1000 Rio Brazos Rd Aztec NM 87410 1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE FEE
District IV Santa Fe, NM 8/505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	NMLC 032326B
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 SUCH	Langlie Mattix Woolworth Unit 8. Well Number 118
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other Injection	8. Well Number 118
2. Name of Operator	9. OGRID Number
Midland Operating, Inc.	148981
3. Address of Operator	10. Pool name or Wildcat
3100 North A, Suite E-120, Midland, Texas 79705	Langlie Mattix 7 Rivers Queen
4. Well Location	
Unit Letter B: 660 feet from the North line and 1980 feet from the East line	
Section 33 Township 24S Range 37E NMPM County Lea	✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING REMEDIAL WORK ALTERING CASING REMEDIAL WORK REME	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	
	_
OTHER:	eady for OCD inspection after P&A
All pits have been remediated in compliance with OCD rules and the terms of the Oper Rat hole and cellar have been filled and leveled. Cathodic protection holes have been	rator's pit permit and closure plan.
A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the	
ODER ATOR NAME A FACE NAME WOLVE WAS A STREET OF A STREET OF A STREET	
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR	
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.	
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and	
other production equipment. Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.	
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with	
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed	
from lease and well location.	
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have	
to be removed.)	
 ✓ All other environmental concerns have been addressed as per OCD rules. ✓ Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non- 	
retrieved flow lines and pipelines.	
When all work has been completed return this form to the appropriate District - CC - to - the	.4.1
When all work has been completed, return this form to the appropriate District office to schedule an inspection.	
SIGNATURE THE President President	DATE3-5-2010
TYPE OR PRINT NAME Victor 1. Sirgo E-MAIL: vjsirgo@sbcglobal.n	et PHONE: 432-638-5551
For State Use Only	m / /
APPROVED BY: Wash whitale TITLE Counting ()	HCOS/16/2010
Conditions of Approval (if any):	DATE OF 15 TO