Submit 1 Copy To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resou	Form C-103 October 13,2009
District I 1625 N. French Dr., Hobbs, NM 8824 BBS O		WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	ON 30-025-11169 5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NMMAN 18	1220 South St. Francis Dr.	STATE FEE Fed
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505		
	S AND REPORTS ON WELLS S TO DRILL OR TO DEEPEN OR PLUG BACK TO	7. Lease Name or Unit Agreement Name
(=	ON FOR PERMIT" (FORM C-101) FOR SUCH	Langlie Jack Unit
	s Well \ Other Injection	8. Well Number
2. Name of Operator		9. OGRID Number
3. Address of Operator	g. Inc.	10. Pool name or Wildcat
505 N. Big Spring,	Suite 204	Langlie mattix-Trurs QB
4. Well Location		100
		and 1980 feet from the E line
Section 20	Township 24 S Range 37 1. Elevation (Show whether DR, RKB, RT,	
	1. Elevation (Show whether DK, KKD, KT,	Gr, etc.)
		. ,
12. Check App	propriate Box to Indicate Nature of	Notice, Report or Other Data
NOTICE OF INTE	NTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK 💢 🏻 P	LUG AND ABANDON 🔲 REMEDI	AL WORK ALTERING CASING
-	_	NCE DRILLING OPNS. P AND A
PULL OR ALTER CASING N DOWNHOLE COMMINGLE	IULTIPLE COMPL CASING	CEMENT JOB
-		_
OTHER:	d operations (Clearly state all pertinent d	etails, and give pertinent dates, including estimated date
of starting any proposed work)	SEE RULE 10 15 7 14 NMAC For Mu	Itinle Completions: Attach wellhore diagram of
Del Pro Dony	W/ PC 23/8" +ba. les	it Hbg GIH. Run press
RELINE TOOM	5	
test on annuli	٨٥٠	
,	•	
Per Underground Injection Control F	Orogram Manual	
1.6 C Packer shall be set within or		Condition of Approval: Notify OCD Hobbs office 24 hours prior of running MIT Test & Chart
eet of the uppermost injection perfs		omec 24 hours prior or furning with Test & Chart
	1 5: 5: 5:	
Spud Date:	Rig Release Date:	
I hereby certify that the information abo	ve is true and complete to the best of my k	nowledge and belief.
\circ	\bigcap \bigcap \bigcap	
SIGNATURE () M. M.	Unu TITLE Presider	DATE 4-25-11
Type or print name y ag M - M For State Use Only	E-mail address:	PHONE: 432-682-3499
5/-		
APPROVED BY:	to THE STATE	1 MGT DATE 5-23-COLL
Conditions of Approval (if any):		,
		ડ
		_

30-025-11169-00-00

Company Name: MCDONNOLD OPERATING INC

Location: Sec: 20 T: 24S R: 37E Spot:
Lat: 32.1973686092765 Long: -103.18279260094

Property Name: LANGLIE JACK UNIT

County Name: Lea

Cement from 368 ft. to surface Surface: 10.75 in. @ 368 ft. Hole: 10.75 in. @ 368 ft.

LANGLIE JACK UNIT No. 014

String Information							
String	Bottom (ft sub)	Diameter (inches)	Weight (lb/ft)	Length (ft)			
HOL1	368	10.75					
SURF	368	10.75	40	368			
HOL3	3330	7					
PKR	3517	7		5			
PROD	3330	7	22	3330			
T1	3512	2		3512			

Cement Information

String	BOC (ft sub)	TOC (ft sub)	Class	Sacks
PROD	3330	0	С	900
SURF	368	0	С	175

Perforation Information

Top (ft sub) 3338 Bottom (ft sub) 3593

Shts/Ft

No Shts

Dt Sqz

Formation Information
St Code Formation

Depth

Cement from 3330 ft. to surface

Packer: 7 in. @ 3517 ft.

Tubing: 2 in. @ 3512 ft.

Production: 7 in. @ 3330 ft.

Hole: Unknown

TD:

TVD: 3593

PBTD: