

Submit 1 Copy To Appropriate District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
October 13, 2009

RECEIVED

JUN 06 2011
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505
HOBBSUCB

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. 30-025-11154
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>Injection</u>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> <u>Fed</u>
2. Name of Operator <u>McDonnold Operating Inc.</u>		6. State Oil & Gas Lease No.
3. Address of Operator <u>505 N. Big Spring, Suite 204, Midland Tx 79701</u>		7. Lease Name or Unit Agreement Name <u>Langlie Jack Unit</u>
4. Well Location Unit Letter <u>I</u> : <u>1980</u> feet from the <u>S</u> line and <u>660</u> feet from the <u>E</u> line Section <u>20</u> Township <u>24S</u> Range <u>37E</u> NMPM <u>Lea</u> County <u>Nm</u>		8. Well Number <u>12</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number <u>14372</u>
		10. Pool name or Wildcat <u>Langlie Mattix, Wrs. QN 6B</u>

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: MIT ☒

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Perform MIT. 24 hrs. notice will be given prior to test.

Per Underground Injection Control Program Manual
11.6 C Packer shall be set within or less than 100
feet of the uppermost injection perfs or open hole.

The Oil Conservation Division **Must be notified**
24 hours prior to the beginning of plugging operations

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE C. M. McDonnold TITLE President DATE 6-6-11
Type or print name Craig M. McDonnold E-mail address: _____ PHONE: 432-682-3499
For State Use Only

APPROVED BY: [Signature] TITLE SAFH MGR DATE 6-7-2011
Conditions of Approval (if any): _____