

Submit 1 Copy To Appropriate District  
Office  
District I- (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II- (575) 748-1283  
1301 W. Grand Ave., 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  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-015-41756
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. Fee
7. Lease Name or Unit Agreement Name Wind Fee
8. Well Number 2
9. OGRID Number 013837
10. Pool Name or Wildcat Forehand Ranch; Delaware
11. Elevation (Show whether DR, RKB, RT, GR etc.) 3138' GR

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.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Mack Energy Corporation	
3. Address of Operator P.O. Box 960 Artesia, NM 88210	
4. Well Location Unit Letter <u>F</u> <u>1650</u> feet from the <u>North</u> line and <u>2310</u> feet from the <u>West</u> line Section <u>4</u> Township <u>23S</u> Range <u>27E</u> NMPM County <u>Eddy</u>	
11. Elevation (Show whether DR, RKB, RT, GR etc.) 3138' GR	

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"/>	REMEDIALWORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input 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"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Completion <input checked="" type="checkbox"/>	

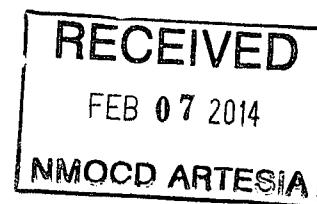
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1/7/2014 Perforated 5264-5456' w/ 50 holes.

1/8/2014 Acidized w/ 52 bbls 15% Acid.

1/16/2014 Frac w/ 20,725 bbls Slick Water, 18,575# 100 Mesh.

1/23/2014 RIH w/ 166jts 2 7/8", 6.5# tubing SN @ 5428', 2 1/2 x 2 x 20' pump.



Spud Date:

11/27/2013

Rig Release Date:

12/5/2013

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

SIGNATURE

Deana Weaver

TITLE Production Clerk

DATE

2.6.14

Type or print name Deana Weaver

E-mail address: dweaver@mec.com

PHONE: 575-748-1288

For State Use Only

APPROVED BY:

RDade

TITLE

Dist. H Supervisor

DATE

2/12/2014

Conditions of Approval (if any):