

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
June 19, 2008

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

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. 30-005-64127
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Mack Energy Corporation		6. State Oil & Gas Lease No. V-8506
3. Address of Operator P.O. Box 960 Artesia, NM 88210		7. Lease Name or Unit Agreement Name K2 State
4. Well Location Unit Letter <u>A</u> <u>180</u> feet from the <u>North</u> line and <u>330</u> feet from the <u>East</u> line Section <u>36</u> Township <u>9S</u> Range <u>29E</u> NMPM County <u>Chaves</u>		8. Well Number 1
11. Elevation (Show whether DR, RKB, RT, GR etc.) 4024' GR		9. OGRID Number 013837
		10. Pool Name or Wildcat Many Gates; Wolfcamp

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

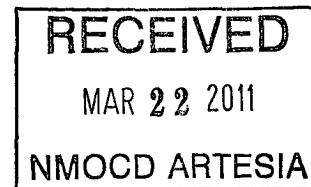
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIALWORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	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"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

**Notify OCD 24 hrs. prior
to any work done.**

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.

Received verbal approval to start the following is the plugging procedure.

1. Set CIBP at 3215' w/ 35' cmt cap.
2. 2625'. 25sx plug (cover intermediate shoe). - Tag
3. 1370'. 25sx plug (cover bottom of salt). - Tag
4. 900'. 25sx plug (cover top of salt and surface shoe). - Tag
5. 60'. Circulate cmt to surface.
6. Install dry hole marker.



Note: Circ. Well with salt gel mud consisting of at least 9.5# Brine with 25 pounds of gel per barrel after the bottom plug is set.

Spud Date:

9/10/2010

Rig Release Date:

9/27/2010

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

SIGNATURE

Jerry W. Sherrell

TITLE Production Clerk

DATE 3/22/11

Type or print name Jerry W. Sherrell

E-mail address: jerrys@mackenergycorp.com

PHONE: (575)748-1288

For State Use Only

APPROVED BY:

[Signature]

TITLE

DATE

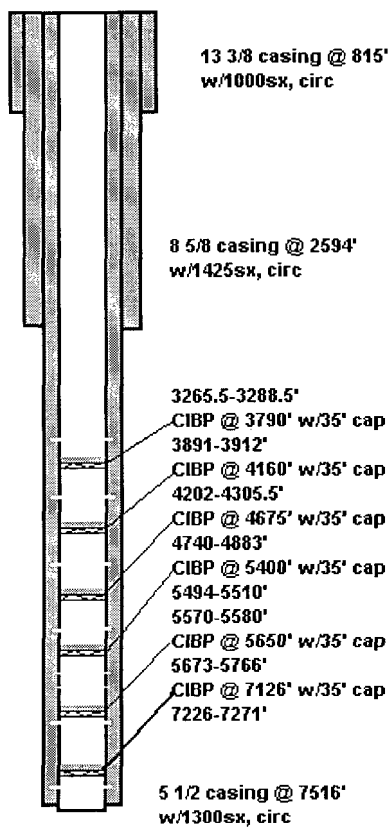
3/22/2011

Conditions of Approval (if any):

Approval Granted providing work
is complete by 9/22/2010

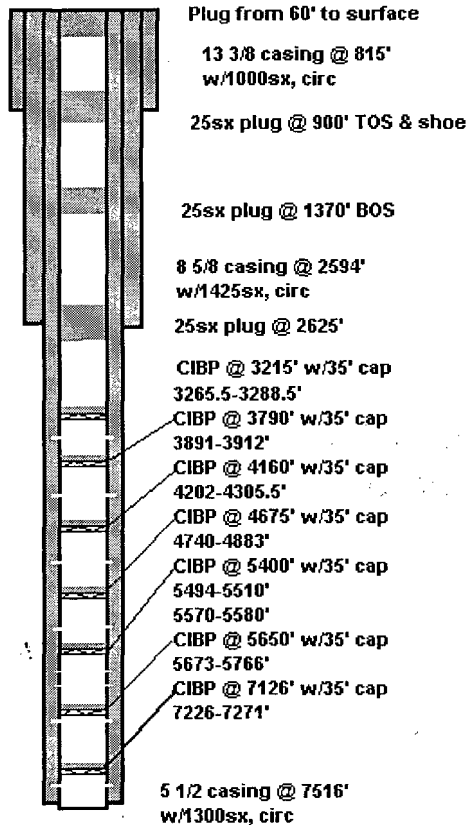
Mack Energy Corporation
K2 State #1 30-005-64127 Sec. 36 T9S R29E

Before



TD 7518'

After



TD 7518'