Submit 3 Copies to Appropriate District Office  State of New Mexico Energ / Inerals and Natural Resources Department	Form C-103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs NM 88240 2040 South Pacheco	WELL API NO. 30-015-05272
DISTRICT II 811 South First, Artesia, NM 887 H	5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410 4508 67 87 170	STATE STATE 6. State Oil & Gas Lease No. B-3627
SUNDRY NOTICES AND REPORTS ON WELLS	D-3027
(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).	7. Lease Name or Unit Agreement Name
I. Type Of Well:  OIL GAS  OTHER	State BK
2. Name of Operator	8. Well No.
Mack Energy Corporation  3. Address of Operator	9. Pool name or Wildcat
P.O. Box 960, Artesia, NM 88211-0960	Grbg Jackson SR Q Grbg SA
Unit Letter M: 660 Feet From The South Line and	539 Feet From The West Line
Section 19 Township 17S Range 31E	Eddy NM
10. Elevation (Show whether DF, RKB, RT, GR, etc	
Check Appropriate Box to Indicate Nature of Notice	Parant an Other Date
	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRIIL	
PULL OR ALTER CASING CASING TEST AN	
OTHER: OTHER_	
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent data work) SEE RULE 1103.	es, including estimated date of starting any proposed
	es, including estimated date of starting any proposed
work) SEE RULE 1103.	
Mack Energy Corporation proposes to plug and abandon as follows:  1. Notify OCD 24 hours before starting. 2. Spot 25 sx cement from 2880'-2780' 100' above perfs and tag. 3. Circulate hole w/mud.  1. Perforate bottom of salt at 1220' and squeeze 35 sx 100' plug from 1220'-1120'-74'  2. Perforate top of salt at 485' and squeeze 35 sx 100' plug from 485'-385'.  3. Spot 10 sx cement from 60' to surface.  3. Spot 10 sx cement from 60' to surface.  3. Cut off well head and install dry hole marker.  1. hereby certify that the information above is true and complete to the best of my knowledge and belief.	
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CONDITIONS OF APPROVAL, IF ANY:

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