District ||

P.O. Box 1980, Hobbs, NM 88240 ...

Fingy. Minerals and Natural Resources Department of Oil Conservation Division

P.O. Box 2083

P.O. Drawer DD. Antesia, NM 88210 Santa Fe, New Mexico 87504-2088

| 1. | | | | | | AUTHORIZATI ATURAL GAS | ON | | | - | | |
|---|--|--|---|--------------------------------|--|-------------------------------|----------|--|-----------------------|------------|------------------|---------|
| Operator: Mack Energy Corporation | | | | | | | API No.: | | | | | |
| Address: P.O. Box 276, Artesia, New Mexico | | | | | | Telephone No.: (505) 748-3436 | | | | | | 36 |
| Reason(s) for Filing (Chec New Well Recompletion Change in Operator X | Oil Casing | Change in | Dny Cond | Gas densate | | | | CTIV | /E JUNE | 1, 199 | | |
| If change of operator give II. DESCRIPTION OF WELL AN | | ress of pro | evious d | operato | | ndall Car D. Box 51 | | | | | Co. | |
| Lease Name Texaco Federal | well No #2 | ŧ | | , Including Formation Queen | | | | ind of Lease No. tate. Federal or Fee NM-0250 | | | | |
| Location: Unit A: 660 Fe | et From The | EAST line | and 3 | 30 Fee | t From | The NORTH | Line. Se | ec | 1 т 205 | R 34E NMP | [™] Lea | County |
| III. DESIGNATION OF TRANSP | ORTER OF OIL | AND NATUR | AL GAS | | | | | | | | | |
| Authorized Transporter of Texaco Trading & T. | | - | 1 | | | address to 60628, M | | | | | is to | be sen |
| Authorized Transporter of Casinghead Gas or Dry Addr | | | | | ress-Give address to which approved copy of this form is to be sent | | | | | | | |
| If well produces oil or liquids, Unit Sec. Twp. give location of tanks A 1 208 | | | | | | | | | | then? | | |
| If this production is comm | ingled with | that from a | any othe | er leas | e or p | ool, give co | mminglin | ā onc | der number | : | | |
| Designate Type of Completion - (X) Dil Well | | | Gas Well Ne | | w Well Workover | | Deepen | oen Plug Back Same | | Same Res | · Di | iff Res |
| Date Spudded Date Compl. Ready to Prod. | | | | | Total Depth | | | P.B.T.D. | | | | |
| Elevations Producing Formation | | | | | Top Oil/Gas Pay | | | Tubing Depth | | | | |
| Perforations | | · · · · · · · · · · · · · · · · · · · | *************************************** | | | ···· | | | Depth C | asing Shoe | | |
| | | TUB | +NG.CAS | ING AND | CEMEN | TING RECORD | | | • | | | |
| Hole Size | ing & Tubi | g & Tubing Size | | | Depth Set | | | Sacks Cement | | | | |
| | en e | | | | | | | | | | | |
| V. TEST DATA AND REQUEST OIL WELL | FOR ALLOWABL | | | | | of total vo able for thi | | | | | | |
| Date First New Oil Run to Tank | | | | of Tes | t F | | Proc | Producing Method | | | | |
| Length of Test | | Casing Pre | | | ssuire | | | Choke Size | | | | |
| Actual Prod. During Test | - Bbì | Bbi Water - Bb | | | is. Ga | | | as - MCF | | | | |
| GAS WELL | | ar allan er en elemente en en elemente elemente elemente elemente elemente elemente elemente elemente elemente | <u></u> | | | | | | | | | |
| Actual Prod Test - MCF/D Length of | | | f Test | | | Bbls. Condensate/MMCF | | | Gravity of Condensate | | | |
| Testing Method Tubing Pressure (Shu | | | ut-in) | | | Casing Pressure (Shut-in) | | | Choke size | | | |
| VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Deb E. Chase, Production Clerk Date | | | | | OIL CONSERVATION DIVISION Date Approved By Orig. Signed by Paul Kautz Geologist | | | | | | | |