District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720
District II
1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources

Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
Permit 88008

WELL API NUMBER
30-005-64056

5. Indicate Type of Lease
S

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFRENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:O

7. Lease Name or Unit Agreement Name
SUMNER STATE

8. Well Number
002

2. Name of Operator
MACK ENERGY CORP

9. OGRID Number
13837

3. Address of Operator
PO BOX 960 , , 11352 LOVINGTON HWY ARTESIA , NM 88211

10. Pool name or Wildcat

4. Well Location
Unit Letter D : 965 feet from the N line and 330 feet from the W line
Section 36 Township 15S Range 29E NMPM Chaves County

11. Elevation (Show whether DR, KB, BT, GR, etc.)
3869 GR

Pit or Below-grade Tank Application ☐ or Closure ☐
Pit Type _____ Depth to Groundwater_____ Distance from nearest fresh water well_____ Distance from nearest surface water_____
Pit Liner Thickness:_____ mil Below-Grade Tank: Volume_____ bbls; Construction Material_____

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTER CASING ☐
TEMPORARILY ABANDON ☐	CHANGE OF PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDON ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
Other:		Other: **Drilling/Cement**	☒

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.

12/17/08 TD 17 1/2 @ 442.
12/18/08 Ran 11jts 13 3/8 48 H-40 @ 442 cmt300sx C tailcmt200sx C2% plugdown 6:30am circ 150sx. WOC 18hrs tst casing to 1800 30mins.
12/21/08 TD 12 1/4 @ 1824. Ran 42jts 8 5/8 32 J-55 @ 1824 cmt550sx C tailcmt200sx CC2% plugdown 4:15am circ 108sx. WOC 12hrs tst casing to 600 30mins.
1/5/09 TD 7 7/8 @ 7850.
1/7/09 Cmtplug @ 7600-7500 w/65sxH cmtplug @ 6200-6100 w/55sxC tagged @ 6053.
1/8/09 Cmtplug @ 4200-4100 w/55sx C tagged @ 4078. Ran 109jts 5 1/2 17 J-55 @ 3928.Cmt 280sx50/50POZ tailcmt725sxPVL plugdown 11:30am circ91sx.WOC 12hrs tst casing to 600 20mins.**12/17/2008** Spudded well.

Casing and Cement Program

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
12/18/08	Surf	FreshWater	17.5	13.375	48	H-40	0	442	500		C		1800		N
12/21/08	Int1	CutBrine	12.25	8.625	32	J-55	0	1824	750		C		600		N
01/08/09	Prod	CutBrine	7.875	5.5	17	J-55	0	3928	1005		POZ		600		N

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed TITLE Production Clerk DATE 1/9/2009
Type or print name Jerry Sherrell E-mail address jerrys@mackenergycorp.com Telephone No. 505-748-1288

For State Use Only:
APPROVED BY: Tim Gum TITLE District Supervisor DATE 1/12/2009 10:28:21 AM