

District I 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720 District II 811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 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 August 1, 2011 Permit 358196
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 NUMBER 30-005-64388
1. Type of Well: Salt Water Disposal		5. Indicate Type of Lease Federal
2. Name of Operator MACK ENERGY CORP		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 960, 11344 Lovington Hwy, Artesia, NM 882110960		7. Lease Name or Unit Agreement Name FRASER SWD
4. Well Location Unit Letter <u>N</u> : <u>330</u> feet from the <u>S</u> line and feet <u>1550</u> from the <u>W</u> line Section <u>25</u> Township <u>15S</u> Range <u>28E</u> NMPM _____ County <u>Chaves</u>		8. Well Number 001H
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3581 GR		9. OGRID Number 13837
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
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: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____ SUBSEQUENT REPORT OF: ALTER CASING <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> Other: <u>Spud</u> <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. <u>1/21/2024</u> Spudded well. Spud 17 1/2" hole @ 8:45am.		
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 <input type="checkbox"/> a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/>		
SIGNATURE Type or print name	Electronically Signed <u>Jerry Sherrell</u>	TITLE E-mail address <u>jerrys@mec.com</u>
For State Use Only: APPROVED BY: <u>Sarah K McGrath</u>		Regulatory Supervisor Telephone No. <u>575-748-1288</u>
TITLE <u>Petroleum Specialist - A</u>		DATE <u>1/22/2024</u>