Submit 1 Copy To Appropriate District S OCD State of New Mexico	Form C-103 Revised July 18, 2013
District I- (575) 393-616 Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II- (575) 748-1283 \\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	30-025-42052
District III- (505) 334-6178 1 000 Pio Propo Pd. Agree NM 874+00 FLV FD 1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
District IV- (505) 476-3460 Santa Fe, NM 8/505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	VB-1049
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR, USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	Condor State
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other	8. Well Number · 6
2. Name of Operator	9. OGRID Number 013837
Mack Energy Corporation 3. Address of Operator	10. Pool Name or Wildcat
P.O. Box 960 Artesia, NM 88210	Airstrip; Bone Spring
4. Well Location	
Unit Letter B 330 feet from the North line and	1650 feet from the East line
Section 25 Township 18S Range 34E 11. Elevation (Show whether DR, RKB, RT, GR etc.	NMPM County Lea
3966' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUE	SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON	
DOWNHOLE COMMINGLE	VI 30B
CLOSED-LOOP SYSTEM Extend APD MOTHER	
OTHER: Extend APD OTHER: 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion	
Mack Energy Corporation would like a 2 year extension on the Condor State #6 APD.	
Mack Energy Corporation would like a 2 year extension on the Condor State #0 AT D.	
APD EXPIRES 08/18/18	
Spud Date: Rig Release Date:	
I hereby certify that the information above is true slid complete to the best of my knowledge and belief.	
SIGNATURE VOLUME WEAVER TITLE Production Clerk DATE 7.27.16	
SIGNATURE JULIANU NEWER TITLE Production Clerk	DATE 1. Δ 1.1(ρ
Type or print name Deana Weaver E-mail address: dweaver@med	e.com PHONE: 575-748-1288
For State Use Only	
APPROVED BY: Petroleum Eng	DATE 08/02/16
Conditions of Approval (Fany):	
	K2 /
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