

1525

Form C-142
Date 06/99

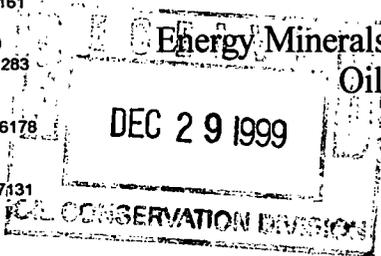
District I - (505) 393-6161
1625 N. French Dr
Hobbs, NM 88241-1980
District II - (505) 748-1283
811 S. First
Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road
Aztec, NM 87410
District IV - (505) 827-7131

New Mexico

Energy Minerals and Natural Resources Department
Oil Conservation Division

2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

SUBMIT ORIGINAL
PLUS 2 COPIES
TO THE SANTA FE
OFFICE



APPLICATION FOR NEW WELL STATUS

I. Operator and Well

| | | | | | | | | |
|--|---------------|------------------------|----------------------------|----------------------|---------------------------|-----------------------|------------------------|-------------------|
| Operator name & address Mack Energy Corporation P.O. Box 960 Artesia, NM 88211-0960 | | OGRID Number 013837 | | | | | | |
| Contact Party Robert C. Chase | | Phone (505)748-1288 | | | | | | |
| Property Name BC Federal | | Well Number 1 | API Number 30-025-34733 | | | | | |
| UL C | Section 20 | Township 17S | Range 32E | Feet From The 330 | North/South Line North | Feet From The 1575 | East/West Line West | County Lea, NM |

II. Date/Time Information

| | | | |
|-------------------------|---------------------|-----------------------------|--------------------------|
| Spud Date 10/18/1999 | Spud Time 6:00pm | Date Completed 12/7/1999 | Pool Maljamar Paddock |
|-------------------------|---------------------|-----------------------------|--------------------------|

- III. Attach copies of Form C-103 or Federal Form 3160-5 showing date/time of drilling commenced and Form C-105 or Federal Form 3160-4 showing well was completed as a producer.
- IV. Attach a list of all working interest owners with their percentage interests.
- V. AFFIDAVIT:

State of New Mexico)
County of Eddy) ss.
Robert C. Chase, being first duly sworn, upon oath states:

- I am the Operator, or authorized representative of the Operator, of the above-referenced well.
- To the best of my knowledge, this application is complete and correct.

Signature [Signature] Title Vice President Date 12/27/99

SUBSCRIBED AND SWORN TO before me this 27th day of December, 1999.

My Commission expires: 12-9-2003 Notary Public [Signature]

FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:
This Application is hereby approved and the above-referenced well is designated a New Well. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval.

| | | |
|---------------------------------|---------------------------|----------------------------|
| Signature <u>[Signature]</u> | Title <u>P.E. Spee</u> | Date <u>FEB 07 2000</u> |
|---------------------------------|---------------------------|----------------------------|

VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: 2/8/00

NOTICE: The operator must notify all working interest owners of this New Well certification.

PVZV2010730940

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN DUPLICATE*
(See other In-
struction on
reverse side)

FOR APPROVED
OMB NO. 1004-0137
Expires: December 31, 1991

| | | | | | | | | | | | |
|--|---------------------------|--|----------------------------------|--|----------------------------|--|------------------------------|--|---------------|---|------------------------|
| WELL COMPLETION OR RECOMPLETION REPORT AND LOG* | | | | | | | | | | 5. LEASE DESIGNATION AND SERIAL LC-029405A | |
| 1a. TYPE OF WELL: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> Other _____ | | | | | | | | | | 6. IF INDIAN, ALLOTTEE OR TRIBE N | |
| b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____ | | | | | | | | | | 7. UNIT AGREEMENT NAME | |
| 2. NAME OF OPERATOR Mack Energy Corporation | | | | | | | | | | 8. FARM OR LEASE NAME, WELL BC Federal #1 | |
| 3. ADDRESS AND TELEPHONE NO. P.O. Box 960, Artesia, NM 88211-0960 (505) 748-1288 | | | | | | | | | | 9. API WELL NO. 30-025-34733 | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 330 FNL 1575 FWL At top prod. interval reported below 330 FNL 1575 FWL At total depth 330 FNL 1575 FWL | | | | | | | | | | 10. FIELD AND POOL, OR WILDCAT Maljamar Paddock | |
| 14. PERMIT NO. _____ DATE ISSUED _____ | | | | | | | | | | 12. COUNTY OR PARISH Lea | 13. STATE NM |
| 15. DATE SPURRED 10/18/99 | | 16. DATE T.D. REACHED 11/2/99 | | 17. DATE COMPL. (Ready to prod.) 12/7/1999 | | 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3990 | | 19. ELEV. CASING HEAD 3978 | | | |
| 20. TOTAL DEPTH, MD & TVD 5900 | | 21. PLUG, BACK T.D., MD & TVD 5883 | | 22. IF MULTIPLE COMPL., HOW MANY* | | 23. INTERVALS DRILLED BY → | | ROTARY TOOLS Yes | CABLE TOOLS | | |
| 24. PRODUCING INTERVAL (S), OF THIS COMPLETION - TOP, BOTTOM, NAME (MD AND TVD)* 5329-5550 Paddock | | | | | | | | | | 25. WAS DIRECTIONAL SURVEY MADE Yes | |
| 26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray, Neutron, Density, Lateralog, Spectral Gamma Ray | | | | | | | | | | 27. WAS WELL CORED No | |
| 28. CASING RECORD (Report all strings set in well) | | | | | | | | | | | |
| CASING SIZE/GRADE | WEIGHT, LB./FT | DEPTH SET (MD) | | HOLE SIZE | | TOP OF CEMENT, CEMENTING RECORD | | | AMOUNT PULLED | | |
| 13 3/8 K-55 | 54.5 | 317 | | 17 1/2 | | 350 sx | | | None | | |
| 8 5/8 K-55 | 24 | 2128 | | 12 1/4 | | 700 sx | | | None | | |
| 5 1/2 J-55 | 17 | 5898 | | 7 7/8 | | 1140 sx | | | None | | |
| 29. LINER RECORD | | | | | | 30. TUBING RECORD | | | | | |
| SIZE | T O P (MD) | BOTTOM (MD) | SACKS CEMENT | SCREEN (MD) | SIZE | DEPTH SET (MD) | PACKER SET (MD) | | | | |
| | | | | | 2 7/8 | 5571 | | | | | |
| 31. PERFORATION RECORD (Interval, size and number) 5329-5550, 1/2, 69 | | | | | | 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC | | | | | |
| DEPTH INTERVAL (MD) | | | AMOUNT AND KIND OF MATERIAL USED | | | | | | | | |
| 5329-5550 | | | 5000 gals 15% acid | | | | | | | | |
| 5329-5550 | | | 32000 gals 20% acid | | | | | | | | |
| 5329-5550 | | | 54,000 gals 40# gel | | | | | | | | |
| 33. PRODUCTION | | | | | | | | | | | |
| DATE FIRST PRODUCTION 12/13/1999 | | PRODUCTION METHOD (Flowing, gas lift, pumping - size and type of pump) 2 1/2 x 2 x 20' HRV | | | | | | WELL STATUS (Producing or shut-in) Producing | | | |
| DATE OF TEST 12/21/1999 | HOURS TESTED 24 | CHOKE SIZE None | PROD'N FOR TEST PERIOD → | OIL-BBL. 77 | GAS-MCF. 253 | WATER-BBL. 635 | GAS-OIL RATIO 3285 | | | | |
| FLOW. TUBING PRESS. | CASING PRESSURE | CALCULATED 24-HOUR RATE → | OIL-BBL. 77 | GAS-MCF. 253 | WATER - BBL. 635 | OIL GRAVITY - API (CORR.) 38 | | | | | |
| 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold | | | | | | | | | | | |
| 35. LIST OF ATTACHMENTS | | | | | | | | | | | |

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Crisand. Carter TITLE Production Analyst DATE 12/21/99

*(See Instructions and spaces for Additional Data on Reverse Side)

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

37. SUMMARY OF POROUS ZONES- (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):

38.

GEOLOGIC MARKERS

| FORMATION | TOP | BOTTOM | DESCRIPTION, CONTENTS, ETC. | NAME | TOP | |
|------------------|------|--------|-----------------------------|------------|------------|-----------------|
| | | | | | MEAS.DEPTH | TRUE VERT.DEPTH |
| Maljamar Paddock | 5324 | 5610 | | Queen | 2994 | |
| | | | | San Andres | 3782 | |
| | | | | Glorietta | 5254 | |

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

NOV 1 1999

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

Oil Well Gas Well Other

2. Name of Operator

Mack Energy Corporation

3. Address and Telephone No.

P.O. Box 960, Artesia, NM 88211-0960 (505)748-1288

4. Location of Well (Footage, Sec., T. R., M. or Survey Description)

Sec 20-T17S-R32E 330 FNL & 1575 FWL

5. Lease Designation and Serial No.

LC-029405-A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

BC Federal #1

9. API Well No.

30-025-34733

10. Field and Pool, or Exploratory Area

Maljamar Paddock

11. County or Parish, State

Lea NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION |
|---|--|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back |
| | <input type="checkbox"/> Casing Repair |
| | <input type="checkbox"/> Altering Casing |
| | <input checked="" type="checkbox"/> Other <u>Spud & Cement casings</u> |
| | <input type="checkbox"/> Change of Plans |
| | <input type="checkbox"/> New Construction |
| | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Conversion to Injection |
| | <input type="checkbox"/> Dispose Water |

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13 Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work)*

10/18/1999 Spud 17 1/2" hole 6:00pm (Called BLM Hobbs, Left mess.)
 10/19/1999 TD 17 1/2" hole 12:30am, RIH with 7 jts 13 3/8" K-55 54.5# ST&C 302' set at 317', cmt with 350sx Class C 2% CaCl, plug down 6:00am circ 63sx to pit. WOC.
 10/21/1999 TD 12 1/4" hole @ 2132' @ 1:50pm. RIH w/51 jts 8 5/8" 24# J-55 ST&C. Landed @ 2128'. RU BJ & cmt/w 450sx 35-65-6 1/4# CF 3# salt & 250sx Class C 2% CC. Circ 66sx. Plug down @ 9:30pm.

14. I hereby certify that the foregoing is true and correct

Signed Cross Carter Title Production Analyst Date 10/27/99

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
 Conditions of approval, if any:

ACCEPTED FOR RECORD
David R. Glass
 OCT 29 1999
 BLM

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

| PROPERTY | DOI | MO/YR | PROPERTY NAME | OWNER SQ | OWNER NAME | INTEREST | INTEREST TYPE | LAST CHANGE |
|----------|-----|-------|---------------|-----------|-----------------------|------------|---------------|-------------|
| 000084 | 001 | J1 | 03/99 BC | FEDERAL 1 | | | | |
| | | | | 999101 00 | CHASE OIL CORPORATION | 1.00000000 | 1 WOR | 9/29/99 |
| | | | | | TOTAL INTEREST | 1.00000000 | | |

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