

Submit 3 Copies
to Appropriate
District Office

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

DISTRICT II
811 South First, Artesia NM 88211

DISTRICT III
1000 Rio Brazos Road, Aztec, NM 87410

State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

CONSERVATION DIVISION

2040 South Pacheco

Santa Fe, New Mexico 87505

WELL API NO.

30-015-32442

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-3627

7. Lease Name or Unit Agreement Name

Antelope State

8. Well No.

6

9. Pool name or Wildcat

Undesignated Maljamar GB SA

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).

1. Type Of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

2. Name of Operator

Mack Energy Corporation

3. Address of Operator

P.O. Box 960, Artesia, NM 88211-0960

4. Well Location

Unit Letter L : 1600 Feet From The South Line and 330 Feet From The West Line

Section 36 Township 17S Range 31E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3813' GR

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER ☐ Completion ☒

12. 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.

12/26/2002 Drill out DV Tool.

12/27/2002 Perforated from 4218-4304' 20 holes. Acidized w/2000 gals 15% NEFE.

12/28/2002 Swab well.

12/31/2002 Frac w/139,500 gals 40# gel, 185,375# 16/30 sand.

01/01/2003 Flow well back.

01/13/2003 RIH w/2 7/8" SN @ 4340' 140 joints, 2 1/2x2x22' pump.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Crissa D. Carter TITLE Production Analyst DATE 3/3/2003

TYPE OR PRINT NAME

Crissa D. Carter

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

MAR 07 2003

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: