

Substitit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103

May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-015-33571
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-5652
7. Lease Name or Unit Agreement Name Southern Cross 18 Com
8. Well Number 1
9. OGRID Number 013837
10. Pool name or Wildcat Wildcat; Cisco-Canyon

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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 H 1980 feet from the North line and 660 feet from the East line
Section 18 Township 18S Range 24E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3839' GR

RECEIVED
NOV 18 2004
OFFICE OF ARTESIA

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: _____ <input 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.

10/09/2004 Spud 12 1/4" hole @ 10:00 PM.
10/12/2004 TD 12 1/4" hole @ 1208', RIH w/27 joints 8 5/8" J-55 24# set @ 1190', Cemented w/780 sx Class H, 10% A-10, 10# LCM, 1/4# CF, 2% CC, tail in w/200 sx Class C, 2% CC, circ 225 sx, plug down @ 6:00 PM. WOC 18 hours tested casing to 1800# for 30 minutes, held OK.
11/12/2004 TD 7 7/8" hole @ 7480'.
11/14/2004 RIH w/169 joints 5 1/2" J-55 17# set @ 7480', Cemented 1st stage w/600 sx 50-50-2, 1% FL52, 5% KCL, 5# LCM, 2nd stage w/450 sx 35-65-6, 3# salt, tail in w/600 sx 50-50-2, 1% FL25, 1% FL52, 5# salt, plug down @ 7:30 AM. WOC 12 hours tested casing to 600# for 20 minutes, held OK.

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 Jerry W. Sherrell TITLE Production Clerk DATE 11/18/2004
Type or print name Jerry W. Sherrell E-mail address: jerry@mackenergycorp.com Telephone No. (505)748-1288
For State Use Onl

FOR RECORDS ONLY

NOV 23 2004

APPROVED BY: _____ TITLE _____ DATE _____
Conditions of Approval (if any): _____