Submit 3 Copies

to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

Revised	1-1-89

DISTRICT I P.O. Box 1980, Hobbs NM 88240 OIL CONSERVATION DIVISION 2040 South Pacheco WELL API NO.	WELL API NO.			
DISTRICT II 811 South First, Artesia, NM 88210 Santa Fe, New Mexico 87505 5. Indicate Type of Lease	TE 🗆	FEE		
DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410 6. State Oil & Gas Lease No. NM-21888		FEE -		
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 CALOL) FOR SUCH PROPOSALS)	ment Name			
1. Type Of Well: OIL S GAS WELL OTHER OTHER OTHER OTHER OTHER OTHER OTHER	1			
2. Name of Operator Mack Energy Corporation 3. Address of Operator 9. Pool name or Wildcat				
3. Address of Operator 9. Pool name or Wildcat				
P.O. Box 960, Artesia, NM 88211-0960 Grayburg Jackson SR Q	G SA			
4. Well Location				
Unit Letter J Feet From The Line and Feet From The		Line		
Section 34 Township 17S Range 29E NMPM Eddy		County		
10. Elevation (Show whether DF, RKB, RT, GR, etc.)				
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT	ΓOF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERIN	G CASING			
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AN	ID ABANDO	ONMENT		
PULL OR ALTER CASING CASING TEST AND CEMENT JOB				
OTHER: OTHER Name Change		oxdots		
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting a work) SEE RULE 1103.	ny proposed			
SEE ATTACHED for name change on above referenced lease effective 9/1/05.				
I hereby certify that the information above is true and complete to the heat of my knowledge and heliof				
I hereby certify that the information above is true and complete to the best of my knowledge and belief. Production A nalyst	9/6	5/05		
SIGNATURE		5/05		
SIGNATURE	9/6 IONE NO 74			
SIGNATURE TITLE Production Analyst DATE - TYPE OR PRINT NAME 9 Crissa D. Carter TELEPH (This space in State U.e.)	IONE NO 74			

API# OLD NAME NEW NAME POOL TWNSP RNG SEC UNIT COUNTY

		35///						
30-015-23034	FM Robinson B Unit TR 1 #1	Adams Federal 1	Grayburg Jackson;SR-Q-G-SA	17S	29E	34	J	Eddy
30-015-24419	FM Robinson B Unit TR 1 #2	Adams Federal 2	Grayburg Jackson;SR-Q-G-SA	17S	29E	34	J	Eddy

