

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

5. Lease Serial No.
NMNM118706

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
BLACK CAT FEDERAL 3

2. Name of Operator
MACK ENERGY CORPORATION
Contact: ROBERT CHASE
E-Mail: JERRYS@MEC.COM

9. API Well No.
30-015-36040

3a. Address
P.O. BOX 960
ARTESIA, NM 88210

3b. Phone No. (include area code)
Ph: 575-748-1288
Fx: 575-746-9539

10. Field and Pool, or Exploratory
EMPIRE; GLORIETA- YESO

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 14 T17S R28E NESW 1650FSL 1650FWL

11. County or Parish, and State
EDDY COUNTY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input checked="" type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

4/30/2013 FRAC PERFS @ 3660-3957.5' W/ 48 BBLS 15% ACID, 22,259 BBLS SLICKWATER, 34,699# 100 MESH, 219,324# WHITESAND 40/70.
5/2/2013 RIH W/ 160 JTS 2 7/8" J-55 6.5# TUBING, SN @ 4994'; 2 1/2 X 2 X 16' PUMP.

Accepted for record
NMOC

Handwritten signature and date: 5/24/13

RECEIVED
MAY 20 2013
NMOC ARTESIA

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #207271 verified by the BLM Well Information System For MACK ENERGY CORPORATION, sent to the Carlsbad Committed to AFMSS for processing by KURT SIMMONS on 05/14/2013)

Name (Printed/Typed) DEANA WEAVER Title PRODUCTION CLERK

Signature (Electronic Submission) Date 05/13/2013

ACCEPTED FOR RECORD
MAY 16 2013 Date
Handwritten signature
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____ Title _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. Office _____

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

Handwritten initials: AW