

Submit 1 Copy To Appropriate District Office
 District I- (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II- (575) 748-1283
 1301 W. Grand Ave., Artesia, NM 88210
 District III- (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV- (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

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

WELL API NO. 30-015-41756
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. Fee
7. Lease Name or Unit Agreement Name Wind Fee
8. Well Number 2
9. OGRID Number 013837
10. Pool Name or Wildcat Forehand Ranch; Delaware
11. Elevation (Show whether DR, RKB, RT, GR etc.) 3138' GR

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 88210

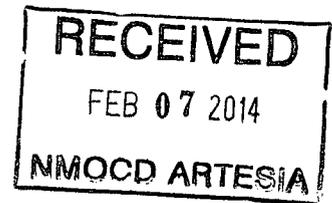
4. Well Location
 Unit Letter F 1650 feet from the North line and 2310 feet from the West line
 Section 4 Township 23S Range 27E NMPM County Eddy

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"/>	REMEDIALWORK <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 type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Completion <input checked="" 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or re-completion.

- 1/7/2014 Perforated 5264-5456' w/ 50 holes.
- 1/8/2014 Acidized w/ 52 bbls 15% Acid.
- 1/16/2014 Frac w/ 20,725 bbls Slick Water, 18,575# 100 Mesh.
- 1/23/2014 RIH w/ 166jts 2 7/8", 6.5# tubing SN @ 5428', 2 1/2 x 2 x 20' pump.



Spud Date: Rig Release Date:

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

SIGNATURE Deana Weaver TITLE Production Clerk DATE 2.6.14

Type or print name Deana Weaver E-mail address: dweaver@mec.com PHONE: 575-748-1288

For State Use Only
 APPROVED BY: RP Dade TITLE Dist. Rep. Supervisor DATE 2/12/2014
 Conditions of Approval (if any):