Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I- (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II- (575) 748-1283	,	WELL API NO. 30-015-42320
1301 W. Grand Ave., Artesia, NM 8821 0	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> - (505) 334-6178 I 000 Rio Brazos Rd., Aztec, NM 8741 0	1220 South St. Francis Dr.	STATE ☐ FEE ☒
District IV- (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		Fee
SUNDRY NOT	TICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	DSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	
PROPOSALS:)	<u>_</u>	Cascade Fee
1. Type of Well: Oil Well	Gas Well Other	8. Well Number 1
2. Name of Operator Mack	Energy Corporation	9. OGRID Number 013837
3. Address of Operator	3,000,000	10. Pool Name or Wildcat
,	60 Artesia, NM 88210	Cass Draw; Bone Spring
4. Well Location		
Unit Letter J	1650 feet from the South line and	1650 feet from the East line
Section 32	Township 22S Range 27E	NMPM County Eddy
	11. Elevation (Show whether DR, RKB, RT, GR etc.	c.)
	3160' GR	
12 Chaok	Annropriate Roy to Indicate Nature of Natice	Panort or Other Data
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
		BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	· — (· —
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DE	
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEME	NT JOB L
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM		
OTHER:	OTHER:	
	pleted operations. (Clearly state all pertinent details, a	
of starting any proposed work	k). SEE RULE 19.15.7.14 NMAC. For Multiple Completic	ons: Attach wellbore diagram of proposed completion
•	ses to change the TD of the Cascade Fee #1 to 9600	11
Mack Energy Corporation propos	es to change the 1D of the Cascade Fee #1 to 9000	' .
		•
E. Z.	,	NM OIL CONSERVATION
1		ARTESIA DISTRICT
	•	JUL 28 2014
		00L 20 201T
		RECEIVED
		⊌PPTAEP
Spud Date:	Rig Release Date:	
	Mig Release Bate.	
I hereby certify that the information above is true slid complete to the best of my knowledge and belief.		
SIGNATURE Camp W.	Shevall TITLE Production Clerk	DATE7/25/14
7 0:		DATEMANTA
Type or print name Jerry W. Sherr	ell E-mail address: jerrys@mec.co	om PHONE: 575-748-1288
For State Use Only	1-10	7/ 7/ ·
APPROVED BY:	Oell TITLE (15	DATE / 28/1/
Conditions of Approval (if any):	THE CONTRACTOR	DAIL / (