

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

Form C-103  
 Revised July 18, 2013

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.)		WELL API NO. <b>30-005-64009</b>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>Mack Energy Corporation</b>		6. State Oil & Gas Lease No. <b>V-8033</b>
3. Address of Operator <b>P.O. Box 960 Artesia, NM 88210</b>		7. Lease Name or Unit Agreement Name <b>Falcon State</b>
4. Well Location Unit Letter <u>C</u> <del>335</del> <sup>355</sup> feet from the <u>North</u> line and <u>2369</u> feet from the <u>West</u> line Section <u>16</u> Township <u>14S</u> Range <u>29E</u> NMPM County <u>Chaves, NM</u>		8. Well Number <u>2</u>
11. Elevation (Show whether DR, RKB, RT, GR etc.) <b>3712' GR</b>		9. OGRID Number <b>013837</b>
10. Pool Name or Wildcat <b>WC; Lone Wolf, San Andres South</b>		

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 checked="" 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: <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

6/4-5/2018 Tag CIBP @ 2550'. circ 65bbls salt water mud, tst csg to 500#. Set 25sx cmt plug @ 2550'. WOC 4hrs. Tag plug @ 2290'. 25sx cmt plug @ 1700'. 25sx cmt plug @ 1000'. tag @ 760', perforated @ 374', sqz 40sx WOC per OCD, pumped 40sx. WOC. tag @ 180', tst to 2000#, perforated @ 100', sqz 25sx @ 1600# . Released Rig and Installed dry-hole marker.

**NM OIL CONSERVATION  
 ARTESIA DISTRICT**

**JUN 08 2018**

**RECEIVED**

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 6/8/2018

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

**For State Use Only**

APPROVED BY: [Signature] TITLE Staff DATE 6-8-18  
 Conditions of Approval (if any):