Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103 June 19, 2008
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 8821 0	OIL CONSERVATION DIVISION		30-005-64095 5. Indicate Type of Lease
District III	1220 South St. Francis Dr.		STATE STATE FEE
I 000 Rio Brazos Rd., Aztec, NM 8741 0 District IV	Santa Fe, NM 87	7505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			L-0729
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(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			Round Tank SWD ~
PROPOSALS.)			0. 17/ 11.2/
1. Type of Well: Oil Well Gas Well Other 2. Name of Operator		9. OGRID Number	
Mack Energy Corporation		013837	
3. Address of Operator			10. Pool Name or Wildcat
P.O. Box 960 Artesia, NM 88210		SWD; Devonian	
4. Well Location Unit Letter K	1980 feet from the South	n line and	1980 feet from the West line
Section 19		inge 29E	NMPM County Chaves
11. Elevation (Show whether DR, RKB, RT, GR etc.)			
3735' GR			
- 12 Chack	Annropriate Roy to Indicate N	ature of Notice 1	Report or Other Data
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
	ITENTION TO:		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK TEMPORARILY ABANDON	PLUG AND ABANDON CHANGE PLANS	REMEDIALWORK COMMENCE DRIL	<u>=</u>
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	
DOWNHOLE COMMINGLE			
OTHER:	П	OTHER:	Begin Injection
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
5/26/2009 RIH w/337 jts L-80 IPC tubing. Packer @ 10519'. Load casing with packer fluid.			
5/28/2009 RU kill truck & test casing to 360# 30 min. witnessed by Richard Inge OCD.			
6/1/2009 Began injection.			
			AISETRA GOOMN
AIOZIZA GOOMN			
			LEB \$3 SOU
			(DEALE OF LAND
		•	BECEINED
Spud Date:	Rig Release Da	te:	
		L	
I hereby certify that the information above is true slid complete to the best of my knowledge and belief.			
SIGNATURE Jama W.	Shered TITLE Produc	tion Clerk	DATE2/22/11
Type or print name Jerry W. Sherr	ell E-mail address	: jerrys@mec.con	n PHONE: (575)748-1288
For State Use Only			
APPROVED BY: Purposal (if any):	Nas TITLE COM	phanes Of	FILER DATE 2/24/11