

Submit 1 Copy To Appropriate District
Office
District I- (575) 393-6161
1625 N. French Dr., Hobbs, NM 88241
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

WELL API NO. 30-025-08019
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NMLC029406B
7. Lease Name or Unit Agreement Name Grace Mitchell B Federal
8. Well Number 6
9. OGRID Number 013837
10. Pool Name or Wildcat Maljamar; Grayburg-San Andres

SUDDRY 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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>Injection</u>	
2. Name of Operator Mack Energy Corporation	
3. Address of Operator P.O. Box 960 Artesia, NM 88210	
4. Well Location Unit Letter <u>J</u> <u>1980</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>East</u> line Section <u>5</u> Township <u>17S</u> Range <u>32E</u> NMPM County <u>Lea</u>	
11. Elevation (Show whether DR, RKB, RT, GR etc.) 4103' DF	

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: CIT Test <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 recompletion.

On February 11, 2014, Mack Energy Corporation performed a scheduled MIT test on the above mentioned well. please see the attached chart.

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 Jerry W. Sherrell TITLE Production Clerk DATE 2/12/14

Type or print name Jerry W. Sherrell E-mail address: jerrys@mec.com PHONE: 575-748-1288

For State Use Only

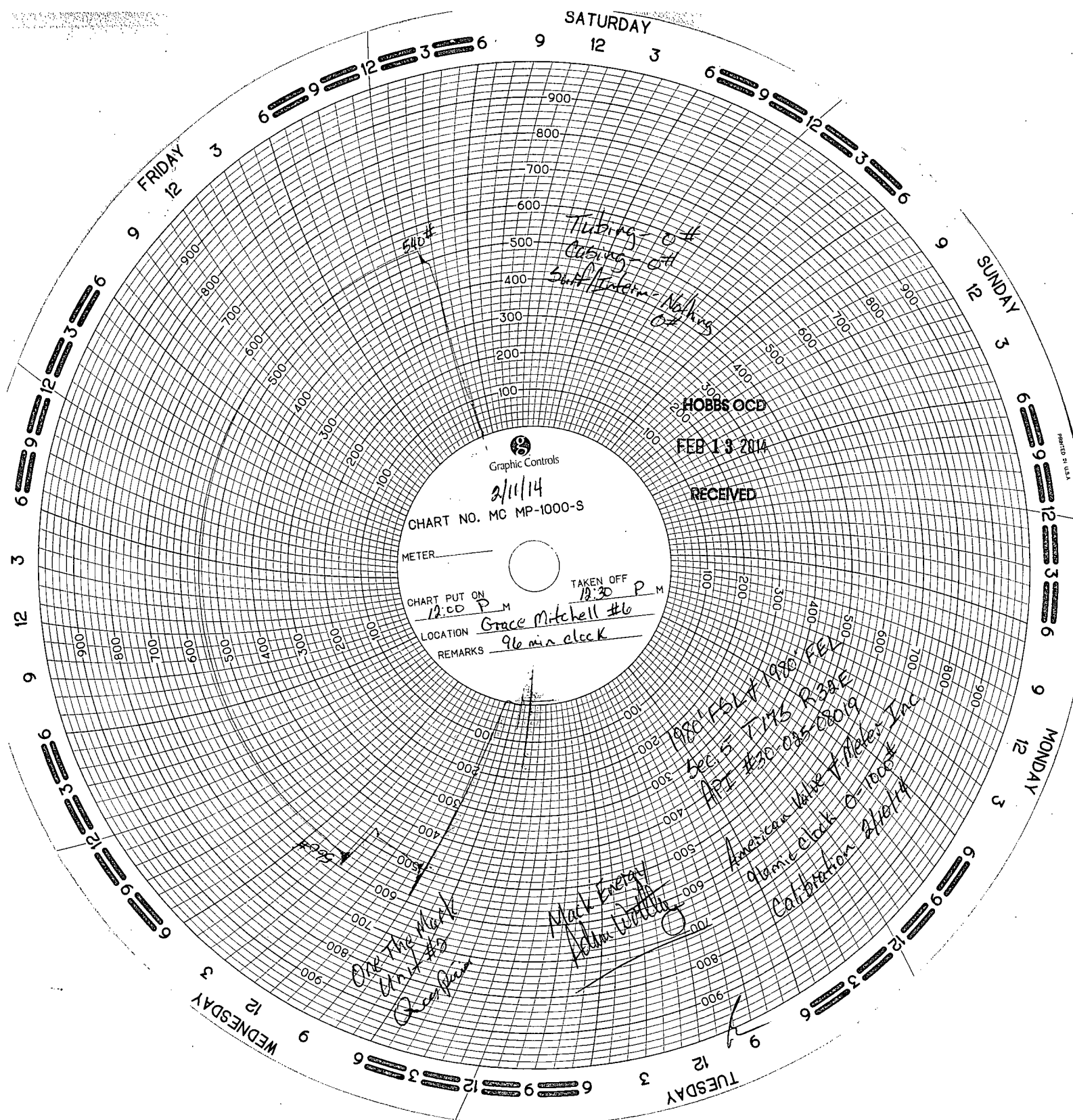
APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

Accepted for Record Only

MRS 2/20/2014

FEB 24 2014



Tubing - 0.4
Casing - 0.4
Surf/Interior - Nothing

HOBBS OCD
FEB 13 2014
RECEIVED

1980 FELT 1990 FEL
Sec 5 T775 R38E
API #30-035-08019
American Valve & Meter Inc
96 min clock 0-1000#
Calibration 2/10/14

One The Mark
Unit #8
Pump

Mack Energy
John W. White