

RECEIVED

NOV 06 2009

HOBBSD

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
1625 N. French Dr.
Hobbs, NM 88240

FORM APPROVED
Budget Bureau No 1004-0135
Expires March 31, 1993
Designation and Serial No

NM 0554963

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

I Type of Well

Oil Well Gas Well Other

2. Name of Operator

Mack Energy Corporation

3 Address and Telephone No

P.O. Box 960, Artesia, NM 88211-0960 (505)748-1288

4 Location of Well (Footage, Sec., T, R, M or Survey Description)

Sec. 3 T15S R30E 1980' FSL & 1650' FWL

6 If Indian, Allottee or Tribe Name

7 If Unit or CA, Agreement Designation

8 Well Name and No

Holbrook Federal #2

9 API Well No

30-005-21146

10 Field and Pool, or Exploratory Area

Wildcat Queen

11. County or Parish, State

Chaves, NM

12 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Abandonment:
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input checked="" type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note Report results of multiple completion on Well Completion or Recompletion Report and Log form)

13 Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work)*

All requirements have been completed for plugging. Please consider this as final abandonment and approve.

14 I hereby certify that the foregoing is true and correct

Signed

[Signature]

Title

Production Analyst

Date

2/22/02

(This space for Federal or State office use)

Approved by

ISI Angel Mayes

Title

Assistant Field Manager,
Lands And Minerals

Date

10/29/09

Conditions of approval, if any

[Signature]

DISTRICT 1 SUPERVISOR

NOV 09 2009

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction