

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720
District II
1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
Permit 88779

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: ☐ 2. Name of Operator MACK ENERGY CORP 3. Address of Operator PO BOX 960 , , 11352 LOVINGTON HWY ARTESIA , NM 88211 4. Well Location Unit Letter <u>3</u> : <u>1650</u> feet from the <u>S</u> line and <u>330</u> feet from the <u>W</u> line Section <u>30</u> Township <u>15S</u> Range <u>29E</u> NMPM <u>Chaves</u> County		WELL API NUMBER 30-005-64072
		5. Indicate Type of Lease S
		6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name ESKIMO STATE		
8. Well Number 009		
9. OGRID Number 13837		
10. Pool name or Wildcat		
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3705 GR.		
Pit or Below-grade Tank Application ☐ or Closure ☐ Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE OF PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
Other:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTER CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐
CASING/CEMENT JOB ☐
Other: **Drilling/Cement** ☒

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.
1/13/2009 Spud 12 1/4" hole @ 8:30pm.
1/15/2009 T D 12 1/4" hole @ 455'. Ran 10 joints, 8 5/8" J-55, 24#, ST&C @ 455'. Cement w/80sx Class H, Tailed cement w/350sx Class C 2% CACL. Plug down 4:45am, circ 31sx. WOC 18 hours tested casing to 1800# for 30 minutes, held ok.
1/20/2009 TD 7 7/8" hole @ 3,363'.
1/21/2009 Ran 80 joints, 5 1/2" J-55, LT&C @ 3,357'. Cement w/275sx 35:65:6 Class C, Tail cement w/375sx 61:15:11, Class C, Poz. Plug down 12:45pm, circ 180sx. WOC 12 hours tested casing to 600# for 20 minutes, held ok. 1/13/2009 Spudded well.

Casing and Cement Program

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
01/15/09	Surf	FreshWater	12.25	8.625	24	J-55	0	455	430		H		1800		N
01/21/09	Prod	CutBrine	7.875	5.5	17	J-55	0	3357	650		C		600		N

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed TITLE Production Clerk DATE 1/21/2009
Type or print name Jerry Sherrell E-mail address jerrys@mackenergycorp.com Telephone No. 505-748-1288

For State Use Only:

APPROVED BY: Tim Gum TITLE District Supervisor DATE 1/22/2009 8:43:52 AM