District I 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720 District II 811 S. First St., Artesia, NM 88210 Phone:(575) 749, 1932 Fax:(575) 749, 0730

State of New Mexico Energy, Minerals and Natural Resources

Form C-103 August 1, 2011

Permit 1720
WELL API NUMBER
30-025-40376
5. Indicate Type of Lease
S
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name
DIAMOND ROCK

Phone:(575) 748-1283 Fax:(575) 748-9720 District III	Oil Conservation Division			30-025-40376 5. Indicate Type of Lease S				
1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170 <u>District IV</u> 1220 S. St Francis Dr., Santa Fe, NM 87505	1220 S. St Francis Dr. Santa Fe, NM 87505							
Phone:(505) 476-3470 Fax:(505) 476-3462	, NM 8/50	6. State Oil & Gas Lease No.						
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFRENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH				7. Lease Name or Unit Agreement Name DIAMOND ROCK				
PROPOSALS.) 1. Type of Well: O					8. Well Number 001			
2. Name of Operator					9. OGRID Number			
MACK ENERGY CORP					13837			
Address of Operator PO Box 960, 11344 Lovington Hwy, Artesia, NM 88211					10. Pool name or Wildcat			
4. Well Location	-							
Unit Letter 2 : 990 feet from	m the N line an	d 2310	feet from the	E	line			
Section 4 Township	18S R	lange 35	E NMPM	I	Lea	County		
Pit or Below-grade Tank Application □ or Closu		ther DR, KB, BT,	GR, etc.)					
Pit Type Depth to Groundwater	Distance from nearest fr	esh water well	Distance fro	m nearest	surface water_			
Pit Liner Thickness: mil B	elow-Grade Tank: Volume_	b	bls; Construction	Material_	0.5-			
 Check Appro NOTICE OF INTENTION 	priate Box to Indicate ON TO:	e Nature of N	otice, Report SUBSEQUE					
PERFORM REMEDIAL WORK PLU	G AND ABANDON [REMEDIAL W	ORK		ALTER CAS	SING		
TEMPORARILY ABANDON CHA	NGE OF PLANS	COMMENCE	DRILLING OPN	IS. 🗌	PLUG AND	ABANDON	1 🗆	
PULL OR ALTER CASING MUI	LTIPLE COMPL	CASING/CEMI	ENT JOB					
Other:		Other: Spud					\times	
 Describe proposed or completed operations. (C work.) SEE RULE 1103. For Multiple Completio 8/20/2013 Spudded well. 					d date of startin	ig any propos	ed	

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 \square , a general permit \square or an (attached) alternative OCD-approved plan \square .

SIGNATURE Electronically Signed TITLE Production Clerk DATE 8/20/2013 Type or print name Jerry Sherrell E-mail address jerrys@mec.com Telephone No. 505-748-1288 For State Use Only:
APPROVED BY: Paul Kautz TITLE Geologist DATE 8/20/2013