

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs NM 88240

DISTRICT II  
811 South First, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM 87410

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe New Mexico 87505

WELL API NO.  
30-015-22154

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
B-8095

7. Lease Name or Unit Agreement Name

Etz C State

8. Well No.  
27

9. Pool name or Wildcat  
Grbg Jackson SR Q Grbg SA

SUNDRY 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 ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator  
Mack Energy Corporation

3. Address of Operator  
P.O. Box 960, Artesia, NM 88211-0960

4. Well Location

Unit Letter E : 1850 Feet From The North Line and 1315 Feet From The West Line

Section 16 Township 17S Range 30E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3687' RT

11.

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 PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☒

CASING TEST AND CEMENT JOB ☐

OTHER ☐

12. 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.

11/20/2002 Drilling cement @ 870', Call OCD Mike Bratcher Ok to perforate @ 869', squeeze 35 sx. WOC and tag plug @ 740'. Mike Bratcher w/OCD OK'd to perforate @ 513' & circ cement to surface inside 7" & 10 3/4" casing w/300 sx.

11/21/2002 Cement fell back 80' in 7" casing, Mike Bratcher OCD OK'd filling casing up w/45 sx. Install dry hole marker.

I hereby certify that the information above is true and complete to the best of my knowledge and belief

SIGNATURE Crissa D. Carter TITLE Production Analyst DATE 1/9/2003

TYPE OR PRINT NAME

Crissa D. Carter

TELEPHONE NO.

(This space for State Use)

APPROVED BY [Signature] TITLE Field Rep ID DATE FEB 17 2003

CONDITIONS OF APPROVAL, IF ANY: