Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103 Revised July 18, 2013
<u>District I-</u> (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	WELL API NO.
District II- (575) 748-1283	OIL CONSERVATION DIVISION	30-015-42355
1301 W. Grand Ave., Artesia, NM 8821 0 District III- (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1 000 Rio Brazos Rd., Aztec, NM 8741 0 District IV- (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM		Fee
87505 SUNDRY NOT	TICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPO	OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	
PROPOSALS.)		Old Cavern Fee 8. Well Number
1. Type of Well: Oil Well 2. Name of Operator	Gas Well Other	9. OGRID Number
	Energy Corporation	9. OGRID Number 013837
3. Address of Operator		10. Pool Name or Wildcat
	60 Artesia, NM 88210	Cass Draw; Bone Spring
4. Well Location Unit Letter K	1650 feet from the South line and	2160 feet from the West line
Unit Letter K Section 32	Township 22S Range 27E	NMPM County Eddy
Section 52	11. Elevation (Show whether DR, RKB, RT, GR e	
	3165' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF IT PERFORM REMEDIAL WORK ☐	I	JBSEQUENT REPORT OF: DRK ☐ ALTERING CASING ☐
TEMPORARILY ABANDON	: = 1	DRILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEME	
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM L. OTHER:	Variance 🗖 OTHER:	. п
13. Describe proposed or comp	pleted operations. (Clearly state all pertinent details,	
of starting any proposed work or recompletion.	k). SEE RULE 19.15.7.14 NMAC. For Multiple Complet	ions: Attach wellbore diagram of proposed completion
•	esting to drill this well to a BHL of 1675 FSL & 2	2285 FWL Sec. 32 T22S R27F. Mack Energy is
	ey only to drill surface casing. A inclination and a	
casing depth to TD.	· ·	
	1	RECEIVED
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		JUN 1 1 2014
		MMOCD ARTESIA
Spud Date:	Rig Release Date:	
I haraby certify that the information	above is true slid complete to the best of my knowle	dgg and haliaf
Thereby certify that the information	above is true sad complete to the best of my knowle	age and benefit
SIGNATURE Ceny W.	Sherrell TITLE Production Clerk	DATE6/11/14
70		
Type or print name Jerry W. Sherr For State Use Only	E-mail address: jerrys@mec.c	com PHONE: 575-748-1288
//\\\\\\\\	Ω	t / 11 02111
APPROVED BY: / / ////// Conditions of Approval (if any): /	TITLE (550/0C15)	DATE 6-11-2014
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