

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-005-604890
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No. K-6647
Lease Name or Unit Agreement Name Double "L" State
Well No. 1
Pool name or Wildcat Double L-QN Associated

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.)

Type of Well:
OIL WELL ☐ GAS WELL ☐ OTHER

Name of Operator
Mack Energy Corporation

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

Well Location
Unit Letter N : 2296 Feet From The West Line and 330 Feet From The South Line
1 Section 15S Township 29E Range NMPM Eddy County

Elevation (Show whether DF, RKB, RT, GR, etc.)
3885GL

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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 ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

Notify 24Hrs. Before starting

1. MIRU POH W/ tubing
2. RIH spot 100' @ 1900 (perf. 1945-58) woc tag Min cement Plug 25sk.
3. Perf. @ 1000 sqz. 100' cmt. (salt 897)
4. Perf @ 514' sqz. 100' plug (7" shoe @ 364')
5. Spot 60' plug @ surface Perforate 4 1/2" csq @ 50'. Circulate cement to Surface.
6. cut off well head install dry hole marker Inside + Outside 4 1/2" csq.



* Brine gel between cement Plugs.

Notitie NM O.C.D to witness Plugging Operations.

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

SIGNATURE Wayne Brooks TITLE Agent DATE 01-09-01

TYPE OR PRINT NAME Wayne Brooks TELEPHONE NO. 915 5807161

(This space for State Use)

APPROVED BY Mrs. S. Wallfield TITLE Field Rep - II DATE 1/12/2001

CONDITIONS OF APPROVAL, IF ANY: