

Form 3160-5
(July 1989)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on re-
verse side)

BLM Roswell District

Modified Form No.

NM60-3160-4

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—" for such proposals.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Mack Energy Corporation		8. FARM OR LEASE NAME Beddingfield Federal	
3. ADDRESS OF OPERATOR P.O. Box 276, Artesia, New Mexico 88210		9. WELL NO. #1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit J, 1650 Feet From the S Line and 1980 Feet From the E Line		10. FIELD AND POOL, OR WILDCAT Square Lake G, S.A.	
14. PERMIT NO.		15. ELEVATIONS (Show whether OF, RT, GR, etc.) O. C. D. ARTESIA, OFFICE	
		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) — Change of operator

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

Change of operator from: Arrowhead Oil Corporation
P.O. Box 548
Artesia, New Mexico 88210

To: Mack Energy Corporation
P.O. Box 276
Artesia, New Mexico 88210

Effective date of change: April 1, 1990

5/22/90

ACCEPTED FOR RECORD

JUN 17 1990

CARLSBAD, NEW MEXICO

RECEIVED
MAY 23 10 55 AM '90
CARLSBAD AREA OFFICE

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side