Submit 3 Copies to Appropriate
District Office

State of New Mexico Energy, inerals and Natural Resources Department Form C-103 Revised 1-1-89

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

OIL CONSERVATION DIVISION

WELL API NO.

	2040 South Pacheco		30-015-03172	
DISTRICT II Sal South First, Artesia, NM 88210	inta Fe, New Mexico 87505	5. Indicate Type of	Lease STATE FEE	
DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410		6. State Oil & Gas B-1266		
SUNDRY NOTICES AN	16. 38 74 - 45.5	一个 没 有一个一个一个一个		
(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).		CK TO A 7. Lease Name or I	Unit Agreement Name	
I. Type Of Well: OIL GAS OTHER WELL OTHER		G J West Coop	G J West Coop Unit	
2. Name of Operator MACK ENERGY CORPORATION		8. Well No. 10	-	
3. Address of Operator	1	9. Pool name or Wildcat		
P.O. Box 960, Artesia, NM 88211-0960 (5	05) 748-1288	Grbg Jackson S	K Q Grbg SA	
Unit Letter L: 1980 Feet From	om The South Line a	and 660 Feet From	The West Line	
Section 28 Townsh	ip Kaige		Eddy, NM County	
	0. Elevation (Show whether DF, RKB, RT, 3570' GR	GR, etc.)		
11. Check Appropria	te Box to Indicate Nature of	Notice, Report, or Other	· Data	
NOTICE OF INTENTION	i	SUBSEQUENT R		
PERFORM REMEDIAL WORK PLUG	AND ABANDON REMEDIA	LWORK	ALTERING CASING	
TEMPORARILY ABANDON CHAN	IGE PLANS COMMEN	CE DRILLING OPNS.	PLUG AND ABANDONMENT	
PULL OR ALTER CASING	CASING T	EST AND CEMENT JOB		
OTHER:	OTHER_			
12. Describe Proposed or Completed Operations (Completed Operation	Clearly state all pertinent details, and give per	tinent dates, including estimated date	of starting any proposed	
1.Set 25 sack plug at 2218'-100' above perf. To	<u> 1</u> 6	34	56789107775	
2.Peforate 4 1/2 csg at 1252' squeeze 100' ceme	ent plug in & out and tag (bottom o	2)	A SULATION AND A SULA	
3.Perf 4 1/2" csg at 400' squeeze 100' cement p	lug in-out 4 1/2" csg TAC	15 00 15 000	AND ANTESIA	
4.Set 10sack surface plug.			ESIA ES	
5. Install dry hole marker and cut off anchors a	nd level location and fill in pit.		ें १८६८८८११ ००	
I hereby certify that the information above is true and complete	toythe best of my knowledge and belief.			
SIGNATURE LISSED. Ca	TITLE	Production Analyst	DATE	
TYPE OR PRINT NAME	Crissa D. Carter		TELEPHONE NO. (505)748-128	

(This space for State Use)

TITLE Field Rep. II