Submit 3 Copies to Appropriate District Office

State of New Mexico Eneisy, Minerals and Natural Resources Department

Form C	-103
Revised	1-1-8

FEE

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

DISTRICT II 811 South First, Artesia, NM 88210

1000 Rio Brazos Rd, Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 South Pacheco

Santa Fe, New Mexico 87505

WEI	LL A	PI N	O.
20	Δ15	Ω/	160

7-013-04109	
Indicate Type of Lease STATE	×

6. State Oil & Gas Lease No.

· · · · · · · · · · · · · · · · · · ·					- 1			1
					B-93	36		
SUNDRY NOTICES AND REPORTS ON WELLS								
(DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVO (FORM C-10		ICATION FOR			7. Le	ease Name or Unit Agree	ment Name	
1. Type Of Well:								
OIL GAS WELL	OTHER				ETZ	State		
2. Name of Operator Mack Energy Corporation					8. W 5	ell No.		
3. Address of Operator		· · · · · · · · · · · · · · · · · · ·			9. Pc	ool name or Wildcat		
P.O. Box 960, Artesia, NM 88211-0960	1				Gray	burg Jackson, 7RVS	S,QN,GB,SA	
4. Well Location								
Unit Letter ! : 2310	Feet From The	South	1	Line and	990	Feet From The	East	Line
Section 16	Township	17S	Range	30E	NMPM	Eddy	•	County
	10. Elevation	on (Show whet	her DF, RI	KB, RT, GR, etc.))		6.1	
\$1.46E-0100 (\$1.5E-0.5E)			3685 G	R				

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data						
NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK		PLUG AND ABANDON		REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON		CHANGE PLANS		COMMENCE DRILLING OPNS.	PLUG AND ABANDONM	ENT 🗵
PULL OR ALTER CASING				CASING TEST AND CEMENT JO	в	
OTHER:				OTHER		

04/26/2000 RIH spot 20sx plug @ 2123'. Tag @ 1947'. Circ. hole w/mud & shut down.

04/27/2000 Perf csg @ 1055'. Couldn't pump into perf. Spot 20sx plug @ 1057'. Perf csg @ 550'. Circ around outside of 7" csg. Mix cmt down 4 1/2" csg. Circ Cmt. on outside of 7" csg inside between 7" & 4 1/2" csg & leave inside 4 1/2" csg full of cm112 13 74 75 76

Set Dry Hole Marker

		Post	P+17 5	13-06	Oc 65 85 129	252 72 20
I hereby certify that the information above is true and	complete to the best of my kno	owledge and belief.	Product	ion Analyst	DATE	5/3/00
SIGNATURE TYPE OR PRINT NAME	Cris	ssa D. Carter				NO (505)748-
(This space for State Use) APPROVED BY APPROVED BY	<u>'</u>	TITLE FLE	ild Ray.	I	DATE 5	31-200

CONDITIONS OF APPROVAL, IF ANY

^{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.