

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. DI 101
311 2. 1st
100-2834

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

C/SF

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

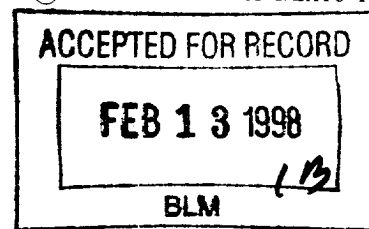
SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Designation and Serial No. NM-86025
2. Name of Operator Mack Energy Corporation		6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 960, Artesia, NM 88211-0960 (505)748-1288		7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T. R., M. or Survey Description) 660 FSL 1980 FWL Sec 17 T17S R30E		8. Well Name and No. McIntyre DK Federal #3
		9. API Well No. 30-015-04186
		10. Field and Pool, or Exploratory Area Loco Hills Paddock
		11. County or Parish, State Eddy, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input checked="" type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Completion	<input type="checkbox"/> Dispose Water
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)		

13 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)*

08/22/97 Drilled out DV Tool @ 4005'. RIH & tag bottom @ 4733'.
11/17/97 Rigged up, ran Gamma and CL, and perforate 61 holes at,
4226,27,41,43,45,47,50,51,59,64,66,76,79,85,88,94,99,4310,18.5,57.5,60.5,66,69,76,4406,08,16.5,24.5,35,38,44,45,46,51.5,52.5,58,69,
73,75,77,79,81,96,98, 4500,01,02,14,16.5,21,23,39,41,42,43.5,53,61,65,75,77,90.
11/18/97 Ran in hole with 4 1/2" PPI tool and 2 7/8" workstring, Broke down Perfs w/Acid. POH with PPI tool, RIH with 4 1/2" RTTS.
11/19/97 Reacidized perfs with 32,000 gals. 20% HCL, 54,000 gals, 40# gel, 5000 gals 15% HCL, 80 bbls fresh water flush.
11/20/97 Release RTTS. POH laying down workstring. RIH w/147 jts 2 3/8" J-55 tbg. Land SN @ 4609'. RIH w/2x1 1/2x16' PAP pump. 124-3/4" & 58-7/8" rods. 2'x3/4" & 2-6'x7/8" ponies.



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

Signed <u><i>Cristina D. Carter</i></u>	Title <u>Production Clerk</u>	Date <u>1/16/98</u>
(This space for Federal or State office use)		
Approved by _____	Title _____	Date _____
Conditions of approval, if any:		