

Form 31605
(June 1988)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

C. Cons.
N.M. Div-Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210

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

LC-029342-A

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

☒ Oil Well ☐ Gas Well ☐ Other

2 Name of Operator

Mack Energy Corporation

3 Address and Telephone No.

P.O. Box 960, Artesia, NM 88211-0960 (505)748-1288

4 Location of Well (Footage, Sec., T. R., M. or Survey Description)

1980 FSL & 1650 FWL, Sec. 21 T17S R30E

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Woolley Federal #3

9. API Well No.

30-015-04251

10. Field and Pool, or Exploratory Area

Loco Hills Abo

11. County or Parish, State

Eddy, NM

12 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☐ Subsequent Report
☒ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other _____
- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ 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)*

All requirements have been completed for plugging. Please consider this as final abandonment and approve.

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

Signed [Signature]

Title Production Analyst

Date 2/8/02

(This space for Federal or State office use)

Approved by [Signature]
Conditions of approval, if any:

Title [Signature]

Date 2/26/2002

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or
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Accepted for record

only FEB 21 2002

gly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements

•See Instruction on Reverse Side

BUREAU OF INVESTIGATION
ROSWELL OFFICE

2002 FEB 11 AM 10:33

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