C15

Submit 3 Copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-015-33216

5. Indicate Type of Lease STATE [XX] FEE [ ]

6. State Oil & Gas Lease No.

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" (FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name: ~~McIntyre A~~ Loco SW

1. Type of Well: OIL WELL [ ] GAS WELL [XX] OTHER

2. Name of Operator: ~~Sabre Operating, Inc.~~ Mack Energy

8. Well No. 1

3. Address of Operator: P.O. Box 4848, Wichita Falls, TX 76308-0848

9. Pool name or Wildcat: S Loco Hills Morrow

4. Well Location
Unit Letter K : 1650 Feet From The South Line and 1980 Feet From The West Line

Section 20 Township 17S Range 30E NMPM Eddy, NM County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3637 GR

11. 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	[X]	REMEDIAL WORK	[ ]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[ ]	CHANGE PLANS	[ ]	COMMENCE DRILLING OPNS.	[ ]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]			CASING TEST AND CEMENT JOB	[ ]		
OTHER:	[ ]			OTHER:			[ ]

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.

(1) Set 5-1/2" CIBP @ 11,001'.
(2) Circulate w/ mud laiden brine.
(3) 25 sx @ 9500'.
(4) 25 sx @ 7750'.
(5) 35 sx 50' in & out of 5-1/2" csg. stub. TAG.
(6) 40 sx @ 6632'.
(7) 50 sx 3544'-3444'.
(8) 40 sx 1300'-1200'.
(9) 50 sx 50' in & out of 9-5/8" csg. stub. TAG.
(10) 100 sx 550'-450'. TAG.
(11) 10 sx 10' - Surface.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Kuya Mussy TITLE Agent DATE 07/14/00

TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY Record Only TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: