Submit 3 Copies to Appropriate District Office

Energy,

State of New Mexico erals and Natural Resources Department CISF

B-255

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

OIL CONSERVATION DIVISION

2040 Pacheco St. Santa Fe, NM 87505

State Oil & Cas Lease N	lo	
	STATE	FEE
Indicate Type of Lease		
30-015-27345		
WELL API NO.		

1000 Rio Brazos Rd., Aztec, NM 87410

(DO NOT LISE THIS FO	RM FOR PRO	ICES AND RE DPOSALS TO DRI RVOIR. USE "APF -101) FOR SUCH	ILL OR TO DEEP! PLICATION FOR F	EN OR PLUG BA		₁Lease Name or Unit G-J West Coop	-	
Type of Well: OIL WELL	GAS WELL		OTHER /		A	\		
² Name of Operator Mack Energy Corpora	tion		/ NA (17) (17)	OCHECK	2007	Well No.	 	
*Address of Operator P.O. Box 960 Artesia	, NM 88211	-0960	هـر. هـري	APTES		Pool name or Wildca Grbg Jackson		
-Well Location Unit LetterL	: 1650	Feet From The	South	Line and	990	Feet From The	west	Line
Section	16	Township	178	Range	29E	NMPM	Eddy	County
1.0		10Eleva 3590	tion (<i>Show whether</i> RKB	DF, RKB, RT, GR,	etc.)			

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11 SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PLUG AND ABANDON **ALTERING CASING** REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ANBANDONMENT COMMENCE DRILLING OPNS. **CHANGE PLANS** TEMPORARILY ABANDON CASING TEST AND CEMENT JOB PULL OR ALTER CASING OTHER:

12Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Notify OCD 24 hrs. Before starting

1. PÓH w/ rods & tubing

2. RIH open end to 2600 spot 100' plug from 2500 to 2600 woc & tag

3. Spot 100' plug from 975 to 1075' (salt 1025) TAG

- 4. Spot 100' plug from 886 to 736 (8 5/8 shoe 836') TAG
- 5. Circulate cmt. from 173' to surface (13 3/8 shoe 123')
- 6. Cut off well head install dry hole marker

* Brine gel between coment Plugs.

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Notific N.M.O.C.D. to witness Plugg	ing Operations.	
I hereby certify that the information above is true and complete to the	best of my knowledge and belief.	
SIGNATURE WASHED MANUEL	TITLE Agent	DATE 03-23-01
SIGNATURE MY MYSTERS		
TYPE OR PRINT NAME Wayne Brooks		TELEPHONE NO. (915)580-7161
(This space for State Use)		
00 10T000 00	TIME Field Rep. II	DATE 3/23/2001
APPROVED BY Tile (Stullefull	THE THE PIE	
CONDITIONS OF APPROVAL, IF ANY:		•