## Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form	C-103
Revis	ed 1-1-8

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

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

CONDITIONS OF AFFROVAL, IF ANY:

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO. 30-015-27359

5. Indicate Type of Lease
STATE X
FEE

6. State Oil & Gas Lease No.

1000 Rio Biazos Rui, Azec, Idia 57410	C. Walter	B-9563		
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		
1. Type of Well: OIL. GAS WELL X WELL OTHER		G-J West Coop Unit		
2. Name of Operator		8. Well No.		
Mack Energy Corporation		#114		
3. Address of Operator		9. Pool name or Wildcat		
P.O. Box 1359, Artesia, NM 88211-1359		Grayburg Jackson SR QN GB SA		
4 Well Location				
Unit Letter E: 1650 Feet From The North Line and 330 Feet From The West Line				
Section 21 Township 17S Range		NMPM Eddy County		
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3608.0 GR				
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION TO: SUB:		SEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING		
	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT		
OLE OIT ALL OIT OF THE PROPERTY OF THE PROPERT	CASING TEST AND CEMENT JOB			
OTHER:	OTHER: Intermediate csg X			

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.

Drilled 12 1/4" hole to 800'. Ran in hole w/19 jts 8 5/8" 24# J-55 STC R-3 csg. Landed csg at 784'. Cemented w/500sx Class C w/2% CC. Circ 115sx cmt. Plug down @ 11:30 pm 4/25/93. WOC 12 hrs., tstd csg to 600# f/20 minutes--held okay.

de la the best of my imperior	vice and belief.	
i hereby certify that the information above is true and complete to the best of my knowled	mme Production Clerk	DATE5/10/93
TYPE OR PRINT NAME Crissa D. Carter		TELEPHONE NO. 748-1288
(This space for State Use)  ORIGINAL SIGNED BY MIKE, WILLIAMS SUPERVISOR, DISTRICT 19		MAY 2 8 1993
APPROVED BY—	mr.s	•