

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.

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.
B-1266

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

G-J West Coop Unit

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Mack Energy Corporation

3. Address of Operator

P.O. Box 1359, Artesia, NM 88211-1359

8. Well No.

#118

9. Pool name or Wildcat

Grayburg Jackson SR QN GB SA

4. Well Location

Unit Letter C : 990 Feet From The North Line and 2310 Feet From The West Line

Section 21

Township

17S

Range

29E

NMPM

Eddy

County

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

3604.0 GR

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Spud and cmt csg ☒

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.

Spudded @ 11:30 am 4/4/93. Drilled 17 1/2" hole to 150', ran in hole w/4 jts 13 3/8" 54.5# J-55 STC R-1 csg. Landed csg @ 134', cement w/200sx Class C w/2% CC. Circ 100sx cmt. Plug down @ 6:45 pm 4/4/93. WOC 12 hrs., tstd csg to 600# f/20 minutes--held okay.

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

SIGNATURE

Crissa D. Carter

TITLE Production Clerk

DATE 4/6/93

TYPE OR PRINT NAME

Crissa D. Carter

TELEPHONE NO. 748-1288

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

TITLE

DATE

APR 14 1993

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY: