

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.

30-015-28515

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-514

7. Lease Name or Unit Agreement Name

G J West Coop UT

8. Well No.

134

9. Pool name or Wildcat

Grayburg Jackson SR QN GB SA

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.)

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Mack Energy Corporation

3. Address of Operator

P.O. Box 960, Artesia, NM 88211-0960

4. Well Location

Unit Letter H : 1650 Feet From The North Line and 1030 Feet From The East Line

Section 28 Township 17S Range 29E NMPM Eddy County

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

3560 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: TD, 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.

7-8-95 TD 7 7/8" hole @ 4609'. Run 117 jts 5 1/2" 15.5#, R-3, J-55 csg @ 4586'.
Cmt in 2 stages. 1st stage 200sx 50/50 Poz, 2.5# salt, 4/10% Halad 9,
circ 95 sx off DV Tool. 2nd stage cmt w/475sx Hal-Lite, 6# salt, 1/4#
flocele, tail in with 325sx 50/50 Poz, 2.5# salt, 4/10% Halad 9 circ
28sx. WOC 18 hrs, tstd csg to 1800# f/30 minutes -- h

RECEIVED

SEP 28 1995

OIL CON. DIV.
DIST. 2

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

9-25-95

TYPE OR PRINT NAME

Crissa D. Carter

TELEPHONE NO. 748-1288

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

APPROVED BY

TITLE

DATE

OCT 10 1995

CONDITIONS OF APPROVAL, IF ANY: