State of New Mexico

Cl) r
Form C-103	Λ
Revised 1-1-89	

to Appropriate District Office	Energy, Minerals and Natural R	esources Department		Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO. 30-015-28516	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico	87504-2088	5. Indicate Type of Lease	
DISTRICT III			ST.	ATE X FEE .
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease N B-255	o.
SUNDRY NOT	ICES AND REPORTS ON WEL	LLS		
(DO NOT USE THIS FORM FOR PRODIFFERENT RESE	OPOSALS TO DRILL OR TO DEEPEN RVOIR. USE "APPLICATION FOR PE :-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agn	eement Name
1. Type of Well: OIL GAS WELL X WELL	OTHER		G J West Coop UT	1
2. Name of Operator		V	8. Well No.	
Mack Energy Corporatio 3. Address of Operator	n		9. Pool name or Wildcat	
P.O. Box 960, Artesia,	NM 88211-0960		Grayburg Jackson	SR ON GB SA
4. Well Location				
Unit Letter J: 255	9 Feet From The South	Line and253	6 Feet From The	East Line
Section 28	Township 17S Ra	inge 29E j	NMPM Eddy	County
	10. Elevation (Show whether		1///	
<i>(////////////////////////////////////</i>	3571 ' GR	NI CNI C		
	Appropriate Box to Indicate 1		•	NT 05
NOTICE OF IN	TENTION TO:	SUB	SEQUENT REPOR	11 OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERI	NG CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT		
PULL OR ALTER CASING		CASING TEST AND CEMENT JOB		
OTHER:		OTHER: TD, c	mt csg	X
12. Describe Proposed or Completed Operawork) SEE RULE 1103.	ntions (Clearly state all pertinent details, ar	And give pertinent dates, includ	ling estimated date of starring i	any proposed
3793', mrk stage, pum circ off D Hal Lite, salt, 4/10	s, ran logs. Ran 5 1/2' c jt @ 3048'. Landed cs p 170sx 50/50 POZ, 2 1/ OV tool 65sx to pit, cir 6# salt, 1/4# flocele, OX Halad 9, circ 90sx to ces held okay.	sg @ 4583'. Cem /2# salt, bump p cc well 5 hrs. tail in with 2	ent in 2 stages, lug, open DV tool	1st L, 200sx 1) #
•	,		JUL 0 7 1995	
			DIL CON. DI DIST. 2	\mathbb{N} .
I hereby certify that the information above is tru	e and complete to the best of my knowledge and	belief.		
SIGNATURE Cum D		Production Cle	erk DATE	7-6-95
	D. Carter		TELE	PHONE NO. 748-1288
(This space for State Use)				
		· n	DATE	7.11.45
APPROVED BY	Mſ	œ	DATE	

CONDITIONS OF APPROVAL IF ANY: