

UNITED STATES **N.M. Oil Cons. Division**
DEPARTMENT OF THE INTERIOR **800 S. 1st Street**
BUREAU OF LAND MANAGEMENT **Artesia, NM 88210-2834**

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Mack Energy Corporation

3. Address and Telephone No.

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

(505)748-1288

4. Location of Well (Footage, Sec., T. R., M. or Survey Description)

Sec. 22-T17S-R30E 2310 FSL & 990 FEL

5. Lease Designation and Serial No.

LC-029020G

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Dexter Federal #8

9. API Well No.

30-015-30327

10. Field and Pool, or Exploratory Area

Loco Hills Paddock

11. County or Parish, State

Eddy, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

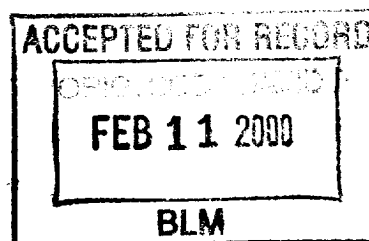
- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other TD, Cement casing
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work)*

2/02/2000 TD 7 7/8" hole @ 5264'.

2/03/2000 RIH 119 joints 5 1/2" 17# LT&C J-55 @ 5261', Cemented 1st stage w/140sx 50/50Poz, 2% Gel, 5# Salt, 5/10% FL25, Cemented 2nd stage w/575sx 35/65 Lite, 6% gel, 3# salt, 1/4# CF tailin w/250sx 50/50 Poz, 2% Gel, 5# salt, 5/10% FL25, circ 10sx plug down 6:00PM.



14. I hereby certify that the foregoing is true and correct

Signed Wanda D. Carter

Title Production Analyst

Date 2/9/00

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____ Date _____

