

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
E. Minerals and Natural Resources Department.

Form C-103
Revised 1-1-89

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

DISTRICT II
811 South First, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, New Mexico 87505

WELL API NO.
30-015-30519

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-7596

7. Lease Name or Unit Agreement Name
Continental B State

8. Well No.
6

9. Pool name or Wildcat
Empire Yeso

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3653

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 M : 660 Feet From The South Line and 607 Feet From The West Line
Section 30 Township 17S Range 29E NMPM Eddy County

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input checked="" type="checkbox"/>	APD Extension <input checked="" type="checkbox"/>

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.

Mack Energy Corporation would like an extension on the Continental B State #6 APD.

APPROVAL VALID FOR 12 DAYS
PERMIT EXPIRES 12/1/99
UNLESS DRILLING UNDERWAY



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

SIGNATURE Alycia Hendey TITLE Production Clerk DATE 11/01/99

TYPE OR PRINT NAME _____ TELEPHONE NO (505)748-1288

(This space for State Use)

APPROVED BY Jim W. Green TITLE District Supervisor DATE 11-2-99

CONDITIONS OF APPROVAL, IF ANY: