

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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. 29-T17S-R29E 2310 FSL & 990 FEL

5 Lease Designation and Serial No.

NM-14840

6 If Indian, Allottee or Tribe Name

7 If Unit or CA, Agreement Designation

8 Well Name and No.

Blue Streak Federal #2

9 API Well No

30-015-30543

10 Field and Pool, or Exploratory Area

East Empire Yeso

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 T A Well  
☐ 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)\*

Mack Energy Corporation Temporarily Abandoned well as Follows:

1. Remove all Down hole equipment
2. Set CIBP @ 3860' w/35' cement.
3. Circ Hole w/packer fluid and test casing to 500#.

Note: Mack Energy Corporation would like to T A this well for a period of 1 year to study the possibility of recompleting as a SWD.

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

Signed

*Ussia D. Carter*

Title

Production Analyst

Date

8/30/00

(This space for Federal or State office use)

Approved by

(0012 000) MEG. LARA

Title

Patrolman Training

Date

9/25/2000

Conditions of approval, if any: