

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
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.
30-015-30591

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
VB-71

7. Lease Name or Unit Agreement Name

Pawnee State

8. Well No.
1

9. Pool name or Wildcat
Loco Hills Paddock

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, N. M. 88211-0960

4. Well Location

Unit Letter G : 2185 Feet From The North Line and 1600 Feet From The East Line

Section 16 Township 17S Range 30E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3676 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 Completion ☒

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.

12/13/2000 RIH drill out DV Tool, log & perf. 4334.5-4721' 75 holes.
12/14/2000 Acidized perms w/2500 gals 15% NEFE.
12/15/2000 Reacidized w/32,000 gals 20% HCL & 54,000 gals 40# gel. Pumped 5000 gals 15% HCL.
12/16/2000 RIH w/L-80 tubing landed @ 4756' w/153 joints & TA @ 4130' w/133 joints. RIH w/2 1/2x2x20' RHBC HVR PAP BNC pump.



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

SIGNATURE

Cessa D. Carr

TITLE

Production Analyst

DATE

1/11/01

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

Jim W. Green *B6A*

District Supervisor

JAN 16 2001

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: