Submit 3 Copies to Appropriate	St E1. خy, Minerals	ate of New Mex and Natural Re		21	CIST	Form C-103 Revised 1-1-89	
District Office <u>DISTRICT I</u> P.O. Box 1980, Hobbs NM 88240	OIL CONSERVATION DIVISION 2040 South Pacheco				ν γ νι ΝΟ.		
DISTRICT II Santa Fe, New Mexico 87505   811 South First, Artesia, NM 88210   DISTRICT III   1000 Rio Brazos Rd, Aztec, NM 87410					30-015-30728 5. Indicate Type of Lease STATE STATE FEE □ 6. State Oil & Gas Lease No. E-4201		
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).					7. Lease Name or Unit Agreement Name		
1. Type Of Well: OIL GAS WELL WELL	OTHER			State S-	19		
2. Name of Operator V Mack Energy Corporation					8. Well No. 9		
3. Address of Operator					9. Pool name or Wildcat		
P.O. Box 960, Artesia, NM 88211 4. Well Location	-0960		·······	Empire	Yeso		
Unit Letter : 33	0 Feet From The	South	Line and	1750	Feet From The	East Li	
Section 19	Township	17S <sub>Ra</sub>	nge 29E	NMPM	Eddy, NM	f County	
	10. Elevatio		OF, RKB, RT, GR, et 538 GR	c.)			
u. Check	Appropriate Box	to Indicate N					
NOTICE OF IN	TENTION TO:			SUBSEQUI	ENT REPORT	OF:	
PERFORM REMEDIAL WORK	PLUG AND AB		REMEDIAL WOR	к		GCASING	
	CHANGE PLAN	NS 🗌	COMMENCE DR	ILLING OPNS.	PLUG AN	D ABANDONMENT	
PULL OR ALTER CASING			CASING TEST AND CEMENT JOB				
OTHER:		🗋	OTHER	TD,	Cement casing		
12. Describe Proposed or Completed work) SEE RULE 1103.		e all pertinent detail	s, and give pertinent d	ates, including estir	nated date of starting a	ny proposed	
10/31/1999 TD 7 7/8" hole @ 4233 11/01/1999 RIH with 104 joints 5		@ 4737 43' ce	ment 1st stage w	vith 140sx 50/5	0 Poz. 2%Gel. 5/	10% FL25, 5# salt	
circ 61sx to pit, plug down 2:30PM							
Poz, 2% Gel, 5/10% FL25, 5# salt,					Allo, #	121314	
					OCDRECENTS ARTED	21 ar a	
I hereby certify that the information above is tr	ue and complete to the best c	of my knowledge and		duction Analy	1523234 50	11/11/99	
SIGNATURE	Lan	TIT	LE Pro	auction Analy	SI DATE -		
TYPE OR PRINT NAME	······	Crissa D. Ca	rter		TELEPHO	DNE NO. (505)748-12	
(This space for State Use)	W. Sum	36 <i>N</i>	District	Supervis	DATE -	11.15.9	

\_ TITLE \_

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY-