

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. 30-015-31279
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-4201
7. Lease Name or Unit Agreement Name State S-19
8. Well No. 16
9. Pool name or Wildcat Empire Yeso

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> 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 <u>J</u> : <u>2310</u> Feet From The <u>South</u> Line and <u>2185</u> Feet From The <u>East</u> Line Section <u>19</u> Township <u>17S</u> Range <u>29E</u> NMPM <u>Eddy</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc) 3680	

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 ☐ Change Casing Size ☐

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 to change the casing program to 8 5/8" 24# casing set at 375' and 5 1/2" 17# casing set at 4200'.
Cement will be circulated on both strings.



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

SIGNATURE Matt J. Brewer TITLE Geological Engineer DATE 9/22/2000
TYPE OR PRINT NAME Matt J. Brewer TELEPHONE NO. (505)748-1288

(This space for State Use)

APPROVED BY Jim W. Green TITLE SUPERVISOR, DISTRICT II DATE SEP 22 2000

CONDITIONS OF APPROVAL, IF ANY:

