

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.
30-015-31366

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-2103

7. Lease Name or Unit Agreement Name

Mesilla State

8. Well No.
2

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 ☒ GAS ☐ 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 H : 1650 Feet From The North Line and 990 Feet From The East Line

Section 16 Township 17S Range 30E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3694 RKB

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.

02/27/2001 Drill out DV Tool
02/28/2001 Perfed casing 4373-4758.5 110 holes.
03/01/2001 Acidize w/2500 gals 15% NEFE.
03/02/2001 Reacidized perfs w/32,000 gals 20% HCL & 54,000 gals 40 # gel & 5000 gals 15% HCL, Flush w/90 bbls FW.
03/03/2001 RIH w/152 joints J-55 2 7/8" landed @ 4795'. 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 Tim W. Gum TITLE Production Analyst DATE 3/27/01

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY Tim W. Gum TITLE DISTRICT II SUPERVISOR DATE APR 03 2001

CONDITIONS OF APPROVAL, IF ANY: