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Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31,1993

5. Lease Designation and Serial No.

		NM-29267
Do not use this form for proposals to dri	AND REPORTS ON WELLS Il or to deepen or reentry to a different reservoir. R PERMIT—" for such proposals	6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
I Type of Well Oil Gas Gas		8. Well Name and No.
Oil Gas Well Other 2. Name of Operator		Gold Star Federal #5
Mack Energy Corporation		9. API Well No.
3. Address and Telephone No.		30-015-31703
P.O. Box 960, Artesia, NM 88211-0960 (505)748-1288		10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec. T.R., M. or Survey Description)		Empire Yeso
Sec 30 T17S-R29E Surface 700 FNL & 300 FEL		11. County or Parish, State
Bottom hole 990 FNL & 990 FEL		
		Eddy, NM
2 CHECK APPROPRIATE BOX	(s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans
INORCE OF THERE	Recompletion	New Construction
Subsequent Report	Plugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	Other Spud & Cement Casings	Dispose Water (Note: Report results of multiple completion on Well
	I pertinent details, and give pertinent dates, including estimated date of startin	Completion or Recompletion Report and Log form.)
CC circ 56sx Plug down @ 10:30 AM. WOO 06/10/2001 5:00 PM TD 12 1/4" hole. RIH v salt & 200sx Class C 2% CC circ. 43sx. Plug 06/19/2001 TD @ 4426' log well.	AU 2001	K. Lented w/275sx 35-65-6 1/4# CF 6# O# for 20 minutes, held OK. z C 2% gel 5/10% FL25. 2nd stage vn 12:00 AM circ 81sx. release rig. O C O C C C C C C C C C C C C C C C C
14. I hereby certify that the foregoing is true and correct/		
Signed (usin) (at	Title Production Analyst	Date7/9/01
(This space for Federal or State office use)		
Approved by	Title	Date
Conditions of approval, if any:		

BUREAU CFLAND MOMI.
PECENVEL OFFICE
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