

Form 3160-5
(July 1989)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTRACT RECEIVING
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on re-
verse side)

BLM Roswell District
Modified Form No.
M0061-3160-4

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" for such proposals.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☐		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Mack Energy Corporation		8. FARM OR LEASE NAME Federal J Empire	
3. ADDRESS OF OPERATOR Post Office Box 276, Artesia, New Mexico 88211-0276		9. WELL NO. 3	
4. LOCATION OF WELL. (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit H: 330 feet from the East line and 2304 feet from the North line.		10. FIELD AND POOL, OR WILDCAT Red Lake/Permian	
14. PERMIT NO.		11. SEC., T., R., M. OR BLK. AND SURVY OR ARMA Sec 1 T18S R17E	
15. ELEVATIONS (Show whether OF, RT, ON, etc.)		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT (F):	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☐
FRACURE TREAT	☐	FRACURE TREATMENT	☐
RIPOUT OR ACIDIZING	☐	RIPOUTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other) Change of operator	☒	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-

Change of operator from: Trigg Family Trust
Post Office Box 520
Roswell, New Mexico 88202-0520

to: Mack Energy Corporation
Post Office Box 276
Artesia, New Mexico 88211-0276

effective August 1, 1992.

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE Vice President

DATE 8/4/92

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side