

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.  
30-015-00921

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Gulf Jackson

8. Well No.  
1

9. Pool name or Wildcat  
Red Lake, Queen GB, SA

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 ☒ GAS WELL ☐ OTHER

2. Name of Operator  
MACK ENERGY CORPORATION

3. Address of Operator  
P.O. Box 960, Artesia, NM 88211-0960 (505) 748-1288

4. Well Location  
Unit Letter D : 330 Feet From The North Line and 330 Feet From The West Line  
Section 18 Township 18S Range 27E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3280'

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: ☐

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.

1. Set 100' cement plug 1578-1478' Min. 25' x cement Plug. TAG

2. Set 100' cement plug 1048'-948'

3. Set 100' plug 1050-950' 50ft above and below 7" csg. Min. 25' x cement Plug. TAG

4. Set 60' surface plug.

5. Install dry hole marker and cut off anchors and level location and fill in pit.

\* Brine gel between all cement Plugs.

\* Notify N.M.O.C.D. to witness Plugging Operations.

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

SIGNATURE

Crissa D. Carter

TITLE

Production Analyst

DATE

6/8/00

TYPE OR PRINT NAME

Crissa D. Carter

TELEPHONE NO. (505)748-1288

(This space for State Use)

APPROVED BY

Michael S. Smith

TITLE

Field Rep II

DATE

6/13/2000

CONDITIONS OF APPROVAL, IF ANY:

