Submit 3 Copies to Appropriate

APPROVED BY-

CONDITIONS OF APPROVAL, IF ANY:

## State of New Mexico y, Minerals and Natural Resources Departmen.

Form C-103 .

District Office Revised 1-1-89 OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs NM 88240 WELL API NO. 2040 South Pacheco 30-015-01947 DISTRICT II 811 South First, Artesia, NM 88210 Santa Fe, New Mexico 87505 5. Indicate Type of Lease FEE 🗍 STATE L 1000 Rio Brazos Rd, Aztec, NM 87410 6. State Oil & Gas Lease No. B-11339 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS). 1. Type Of Well: OIL  $\boxtimes$ OTHER Artesia Metex Unit WEL 2. Name of Operator 8. Well No. Mack Energy Corporation 14 3. Address of Operator 9. Pool name or Wildcat RECEIVED P.O. Box 960, Artesia, NM 88211-0960 Artesia Gueen Grayburg SA 4. Well Location Unit Letter Feet From The Feet From The Section Township Eddy NMPM County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT **PULL OR ALTER CASING** 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. 09/04/96 RU POH w/76 3/4" rods 2-4' ponies. Laid down 62 jts 2 7/8" tbg. 09/05/96 PU 4 3/4" mill & DC & RIH on 2 7/8" prod tbg. Tag @ 2076' w/60 jts & clean out to 2111' w/61 jts. RU Knox & pump 250 gals 15% NEFE acid & wait 1 hr. Blow out spent acid. POH & lay down DC. RIH & land SN @ 2091' w/64 jts & RIH w/new 2 1/2x2x12' Brass Ni Carb pump. 82-3/4" rods 2-4' ponies. 01/10/97 RU laydown rods & tbg. Break off wellhead & shut well in. I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE . TYPE OR PRINT NAME TELEPHONE NO. (505)748-1288 (This space for State Use) NFC - 9 1997 SUPERVISOR, DISTRICT II