

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-015-10244
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No. B_3923-7
Lease Name or Unit Agreement Name State "AG"
Well No. 1
Pool name or Wildcat Artesia QN GRBG 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.)	
Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
Name of Operator Mack Energy Corporation	
Address of Operator P.O. Box 960, Artesia, NM 88211-0960	
Well Location Unit Letter <u>L</u> : <u>2310</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>West</u> Line <u>5</u> Section <u>18S</u> Township <u>28E</u> Range <u>NMPM</u> <u>Eddy</u> County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3645GR	

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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: ☐

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.

Notify 24Hrs. Before starting

1. RIH to 4500 spot 100' plug (perf, 4600 to 4628) TAG
2. Spot 100' plug @ 1075 (salt 1025) TAG
3. Spot 100' plug @ 540 (8 5/8 shoe)
4. Spot 60' plug @ surface
5. cut off well head install dry hole marker
3. Perforate 5 1/2" csg @ 540'. Squeeze 100' cement Plug
Inside & Outside 5 1/2" casing. TAG



* Brine gel between 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 Wayne Brooks TITLE Agent DATE 01-09-01
TYPE OR PRINT NAME Wayne Brooks TELEPHONE NO. 915 5807161

(This space for State Use)

APPROVED BY Mick S. Tullfield TITLE Field Rep. II DATE 1/18/2001
CONDITIONS OF APPROVAL, IF ANY: