State of New Mexico Submit 3 Copies Form C-103 to Appropriate Energy, Minerals and Natural Resources Department Revised 1-1-89 District Office DISTRICT I OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. P.O. Box 2088 Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE TUN 2 4 1992 FEE 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. ್ಷ. C. ರಿ. 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.) Type of Well: GAS WELL Loco Hills State WELL X OTHER 2. Name of Operator 8. Well No. Mack Energy Corporation Artesia on -GB-SA Address of Operator 9. Pool name or Wildcat P.O. Box 276 - Artesia, New Mexico 88211-0276 Well Location : 330 Feet From The Unit Letter West 2260 South Line and Feet From The Section 18 - 528-E NMPM Eddy Township **NMPM** Range 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: 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 5 1/2 CIBP at 1100' and cap W/35' cement 2. Load hole W/mud ... 3. Spot 25 sacks of cement and plug at 400' 4. Spot 10 sacks of cement at surface and set up P. & A. marker

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I hereby certify that the information above is true and complete to the best of my knowl	ledge and belief.	
SIGNATURE May Misse / 10 Missade	_ me super.	DATE 2-13-9:
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TYPE OR PRINT ORIGINAL SIGNED BY RAY SMITH		TELEPHONE NO.
(This space for FIELD REP. 11		
		MAN 2 1 7000
APPROVED BY	— тп.е ————	DATE
CONDITIONS OF APPROVAL, IF ANY:		