## Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

1 1 / 4/1	rm C-103 evised 1-1-8
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DISTRICT I		
P.O. Boy 1080	Hobbs N	JN/ 8874(

OIL CONSERVATION DIVISION

2040 South Pacheco

0 013 32303		
. Indicate Type of Lease	$\boxtimes$	FEE

Line

County

D. 10000 1 000 11	G . F	2040 2000111 4011000	77.606	30-0	15-32365	
DISTRICT II 811 South First, Artesia, NM 882	Santa Fe	e, New Mexico 8	37505	5. Ind	icate Type of Lease STA	TE 🛛
DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 8	7410			6. Stat B-410	e Oil & Gas Lease No. 9	
SUNDR	Y NOTICES AND REP	ORTS ON WELLS				
(DO NOT USE THIS FORM I	FOR PROPOSALS TO DRILL ON TRESERVOIR. USE "APPL (FORM C-101) FOR SUCH PR	OR TO DEEPEN OR PLUICATION FOR PERMIT	JG BACK TO A 262728293	7. Lea	se Name or Unit Agree	ment Name
I. Type Of Well: OIL GAS WELL WELL	OTHER		A 3	Aoud	ad State	
2. Name of Operator Mack Energy Corporation		00 OCA	ECEIVED	8. We ယ 1	ll No.	
3. Address of Operator		18.	ARTESIA	9. Poc	ol name or Wildcat	
P.O. Box 960, Artesia, NM	88211-0960			Tama	no San Andres	
4. Well Location  Unit Letter E:	2310 Feet From The	North St 51	Erigit and Creek	330	Feet From The	West
Section 36	Township	17S Range	31E	NMPM	Eddy	
	10. Elevation	on (Show whether DF, RI	(B, RT, GR, etc.)		market and the second	

11.	Check App	ropriate Box to Indi	cate N	Nature of Notice, Report, or	Other Data	
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 JOI	в	
OTHER:				OTHER	Completion	$\boxtimes$

3812' GR

09/10/2002 Drill out DV tool. Perforated from. 4020-4186' 43 holes.

09/11/2002 Acidized w/2500 gals 15% NEFE.

09/12/2002 Frac w/ 225,000# sand & 147,643 gals 40# gel flush w/87 bbls fresh water.

09/13/2002 Flow well back.

09/18/2002 RIH w/135 joints 2 7/8" tubing SN.@ 4223', RIH w/2 1/2 x 2 x 20' pump.

(This space for start (se)	ORIGINAL SIGNED BY	TIM W. GUM		MO	v 0 6 2002
TYPE OR PRINT NAME	C	rissa D. Carter		TELEPHON	E NO.
1 hereby certify that the information a	bove is true and complete to the best of my l	knowledge and belief.	Production Analyst	DATE —	10/23/02

APPROVED BY-

<sup>12.</sup> 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.