Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

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CISI	Form C-103 _ Revised 1-1-89
911	_ 10011500 1-1-0.

CIST	Form C-103
911)	Revised 1-1-8

DICTRICT	OTT 00110000		_		411	
DISTRICT I P.O. Box 1980, Hobbs NM 88240			WELL API NO			
DISTRICT II	Santa Fe, New Mexico 87505		30-015-323	30-015-32366		
811 South First, Artesia, NM 88210				5. Indicate Ty	pe of Lease STATE	FEE
<u>DISTRICT III</u> 1000 Rio Brazos Rd, Aztec, NM 87410				6. State Oil & B-3627	Gas Lease No.	
SUNDRY NO	TICES AND REPORTS	ON W	/FILS	B-3027		
(DO NOT USE THIS FORM FOR PR DIFFERENT RES	OPOSALS TO DRILL OR TO D SERVOIR. USE "APPLICATION	EEPEN	OR PLUG BACK TO A	7. Lease Name	or Unit Agreement Name	
1. Type Of Well:	C-101) FOR SUCH PROPOSAL	LS).	1213141516			
OIL GAS WELL	OTHER		ERMIT"	Antelope Sta	ite	
2. Name of Operator Mack Energy Corporation /		$-/\infty$	CLO SUIX	8. Well No.		
3. Address of Operator		\ <u>\(\frac{1}{2} \)</u>	RECEIVED	N9. Pool name o	T Wildest	
P.O. Box 960, Artesia, NM 88211-	0960	/0	RECEIVED OCD - ARTESIA	Grayburg	i wildcat	
4. Well Location Unit Letter M: 330	Feet From The S	outh	Line and	1300 1300	rom The West	Lin
Section 36	T1: 17S	_	31E		7.11	
	Township 173 10. Elevation (Show	whether	DF, RKB, RT, GR, etc.) 814' GR	NMPM	Eddy	County
11. Check A	appropriate Box to Indi			Report or Oth	er Data	
NOTICE OF INT	ENTION TO:				REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	\Box	REMEDIAL WORK			Г
TEMPORARILY ABANDON	-				ALTERING CASING	Ļ
	CHANGE PLANS		COMMENCE DRILLII	NG OPNS.	PLUG AND ABANDON	MENT _
PULL OR ALTER CASING			CASING TEST AND	CEMENT JOB		
OTHER:			OTHER	Recomp	oletion	\[\sum_
12. Describe Proposed or Completed O work) SEE RULE 1103.	perations (Clearly state all pertin	ent detai	ls, and give pertinent dates,	including estimated da	te of starting any proposed	
10/22/2002 Set CIBP @ 4330' w/35' 10/23/2002 Test CIBP to 2500 PSI he 10/24/2002 Frac w/130,000# sand, 60 10/28/2002 RIH w/2 7/8" tubing 137	eld-OK, Acidized w/2000 g),000 gals 40# gel.	gals 15	% NEFE.			
I hereby certify that the information above is true an SIGNATURE	d complete to the best of my knowled CA Crissa	TITLE	Production	on Analyst	DATE 12/13/20 TELEPHONE NO.	002
(This space for State Use)	:					====
APPROVED BY For Record (only Box	TITLE			DEC 1 6 2	1992