District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720
District II
1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources

Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
Permit 88226

WELL API NUMBER
30-005-64052

5. Indicate Type of Lease
S

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFRENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name
ESKIMO STATE

1. Type of Well:O

8. Well Number
006

2. Name of Operator
MACK ENERGY CORP

9. OGRID Number
13837

3. Address of Operator
PO BOX 960 , , 11352 LOVINGTON HWY ARTESIA , NM 88211

10. Pool name or Wildcat

4. Well Location
Unit Letter N : 965 feet from the S line and 2310 feet from the W line
Section 30 Township 15S Range 29E NMPM Chaves County

11. Elevation (Show whether DR, KB, BT, GR, etc.)
3721 GR

Pit or Below-grade Tank Application ☐ or Closure ☐
Pit Type _____ Depth to Groundwater_____ Distance from nearest fresh water well_____ Distance from nearest surface water_____
Pit Liner Thickness:_____ mil Below-Grade Tank: Volume_____ bbls; Construction Material_____

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTER CASING ☐
TEMPORARILY ABANDON ☐	CHANGE OF PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDON ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
Other:		Other: **Drilling/Cement**	☒

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1/3/2009 Spud 12 1/4" hole @ 4:00pm.
1/6/2009 TD @ 466'. Ran 11 jts, 8 5/8" J-55 24# @ 466'. Cmt w/180sx RFC, Tailed cmt w/350sx Class C 2%. One inched to surface w/275sx RFC,on 1/7/2009, plug down 4:15pm, circ 2sx. WOC 18 hrs tested casing to 1800# for 30 mins, held ok.
1/12/2009 TD @ 3,348'.
1/13/2009 Ran 91 jts, 5 1/2" J-55, 17# LT&C @ 3326'. Cmt w/375sx 35/65/6 C, Tailed cmt w/500sx 16/61/11 C, plug down 10:00am, circ 180sx. WOC 12 hrs tested casing to 600# for 20 mins, held ok. **1/3/2009** Spudded well.

Casing and Cement Program

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
01/06/09	Surf	FreshWater	12.25	8.625	24	J-55	0	466	805		RFC	466	1800		N
01/13/09	Prod	CutBrine	8.625	5.5	17	J-55	0	3326	875		C		600		N

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed TITLE Production Clerk DATE 1/14/2009
Type or print name Jerry Sherrell E-mail address jerrys@mackenergycorp.com Telephone No. 505-748-1288

For State Use Only:
APPROVED BY: Tim Gum TITLE District Supervisor DATE 1/20/2009 10:55:10 AM