

SUNDRY NOTICES AND REPORTS ON WELLS**Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.**5. Lease Serial No.
NMNM109644

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side.7. If Unit or CA/Agreement, Name and/or No.
NMNM1237678. Well Name and No.
REDSKINS FEDERAL COM 19. API Well No.
30-015-3651110. Field and Pool, or Exploratory
COUNTY LINE TANK ABO11. County or Parish, and State
EDDY COUNTY, NM1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
MACK ENERGY CORPORATIONContact: JERRY W. SHERRELL
E-Mail: jerrys@mec.com3a. Address
PO BOX 960
ARTESIA, NM 88211-09603b. Phone No. (include area code)
Ph: 575-748-12884. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 17 T16S R29E Mer NMP NESE 2285FSL 40FEL**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input checked="" type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Mack Energy Corporation has completed interim reclamation on this location, per BLM requirements.

NM OIL CONSERVATION
ARTESIA DISTRICT

DEC 18 2015

RECEIVED

Accepted for Record Purposes.
Approval Subject to Onsite Inspection.
If BLM Objectives are not achieved,
additional work may be required.

Date: 12-12-15

Signature:

*James A. Pano*12/21/15
Accepted for record
NMOC

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #320438 verified by the BLM Well Information System
For MACK ENERGY CORPORATION, sent to the Carlsbad
Committed to AFMSS for processing by LINDA DENNISTON on 10/26/2015 ()

Name (Printed/Typed) JERRY W SHERRELL

Title PRODUCTION CLERK

Signature (Electronic Submission)

Date 10/19/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

SUNDRY NOTICES AND REPORTS ON WELLS
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DEC 18 2015

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

RECEIVED

5. Lease Serial No. NMNM0107697
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.
8. Well Name and No. REGULUS 26 FED 5H
9. API Well No. 30-015-42489
10. Field and Pool, or Exploratory LUSK; BS WEST
11. County or Parish, and State EDDY COUNTY, NM

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator DEVON ENERGY	
Contact: NICOLE WEDMAN E-Mail: nicole.wedman@dvn.com	
3a. Address 6488 SEVEN RIVERS HWY ARTESIA, NM 88210	3b. Phone No. (include area code) Ph: 575-748-1820
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 26 T19S R31E NENE 380FNL 667FEL 32.637691 N Lat, 103.833503 W Lon	

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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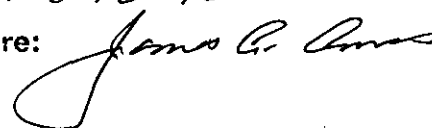
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Accepted for Record Purposes.
Approval Subject to Onsite Inspection.
If BLM Objectives are not achieved,
additional work may be required.

Date: 12-12-15

This location has been downsized. Acres reclaimed = 1.5668 acres.

Signature:



14. I hereby certify that the foregoing is true and correct. Electronic Submission #320705 verified by the BLM Well Information System For DEVON ENERGY, sent to the Carlsbad Committed to AFMSS for processing by LINDA DENNISTON on 10/26/2015 ()	
Name (Printed/Typed) NICOLE WEDMAN	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 10/20/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office _____

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