

Substitut 3 Copies To Appropriate District
Office
District I
1625 N French Dr , Hobbs, NM 88240
District II
1301 W Grand Ave , Artesia, NM 88210
District III
1000 Rio Brazos Rd , Aztec, NM 87410
District IV
1220 S St Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-015-35532
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VB-732
7. Lease Name or Unit Agreement Name Joker State Com
8. Well Number 1
9. OGRID Number 013837
10. Pool name or Wildcat

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐ MAY - 1 2008

2. Name of Operator
Mack Energy Corporation **OCD-ARTESIA**

3. Address of Operator
P. O. Box 960 Artesia, NM 88211-0960

4. Well Location
Unit Letter J 1960 feet from the South line and 1950 feet from the East line
Section 4 Township 23S Range 25E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3735' GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type Depth 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 <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER <u> </u> <input type="checkbox"/>		OTHER: <u>Plug Back</u> <input checked="" type="checkbox"/>	

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.

3/25/2008 Perforated from 10899-10908' 37 holes.
3/26/2008 Acidized w/1500 gals 7 1/2% HCL.
3/28/2008 Set CIBP @ 10,890' w/35' cement cap. Perforated from 10,810-10,836' 105 holes.
3/31/2008 Test CIBP 2000#. Acidized w/3000 gals 7 1/2% HCL.
4/1/2008 Set CIBP @ 10,800' w/35' cement cap.
4/2/2008 Perforated from 10654-10684' 125 holes & 10554-10560' 29 holes.
4/3/2008 Test CIBP 2000#. Acidized w/2600 gals 7 1/2% HCL.
4/7/2008 CIBP @ 10275' w/35' cement cap.
4/8/2008 CIBP @ 9757' w/35' cement cap. Cut 4 1/2" csg @ 8200'.
4/9/2008 Laying down 192 jts of 4 1/2" csg.
4/10/2008 Spot 35sx cement. Plug @ 8254', 50' in & out of 4 1/2" csg. Stub. RIH tag cement @ 7978'.
4/11/2008 CIBP @ 5200' w/35' cement cap.

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 Jerry W. Sherrell TITLE Production Clerk DATE 4/30/08
Type or print name Jerry W. Sherrell E-mail address: jerrys@mackenergycorp.com Telephone No. (575)748-1288
For State Use Only

APPROVED BY: TITLE DATE
Conditions of Approval (if any):

Accepted for record - NMOCD

ONLY