Office Office		te of New M			•	FORM C-103
District I	Energy, Min	ierals and Nati	ural Resources	WELL AF	DI NO	June 19, 2008
1625 N. French Dr., Hobbs, NM 88240 District II	OH CONCEDUATION DIVIGION			30-015-36257		
1301 W Grand Ave, Artesia, NM 8821 0	OIL CONSERVATION DIVISION			5. Indicate Type of Lease		
I 000 Rio Brazos Rd., Aztec, NM 8741 0	1220 South St. Francis Dr.			STATE 🛛 FEE 🗌		
District IV 1220 S St Francis Dr., Santa Fe, NM				6. State Oil & Gas Lease No.		
87505				VB-1034		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				7. Lease Name or Unit Agreement Name		
DIFFERENT RESERVOIR, USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH				Santa Claus State		
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other				8. Well Number		
2. Name of Operator				9. OGRID Number		
Mack Energy Corporation				013837		
3. Address of Operator				10. Pool Name or Wildcat		
P.O. Box 960 Artesia, NM 88210				Crow Flats; Wolfcamp		
4. Well Location	2210	.	,1	220	1	17 4
Unit Letter E	2310 feet from	4.60	205			West line
Section 15	Townsh		ange 28E	NMPM	County	Eddy
	11. Elevation (S		R, RKB, RT, GR etc '' GR	c. <i>)</i>		
	<u> </u>				<u> </u>	
12. Check A	appropriate Box	to Indicate N	Jature of Notice	. Report or	Other Data	
		to maiouto i		•		_
NOTICE OF IN			1		IT REPORT OF	
PERFORM REMEDIAL WORK	PLUG AND ABAN CHANGE PLANS		REMEDIALWO COMMENCE DI		☐ ALTERING S.□ PANDA	CASING []
TEMPORARILY ABANDON PULL OR ALTER CASING	MULTIPLE COM	=	CASING/CEME		S. FANDA	
DOWNHOLE COMMINGLE	MOLTIFEE COM		CASING/CEME	VI 300		
	•					
OTHER: Name C	~		OTHER:	<u> </u>		
13. Describe proposed or comp of starting any proposed w						
or starting any proposed we or-recompletion.	JIK). SEE KULE II	ios. Foi Muinp	The Completions. A	uacii wendoi		725 -
Mack Energy is requesting that the	Santa Claus State	e Com #1 name	e be changed to th	ie Santa Clau		
to be drilled horizontal across Uni						
NSL-6035.						
				_		
Spud Date:		Rig Release D	ate:			
Space Date.		Rig Release D	ate.			
I hereby certify that the information	above is true slid co	omplete to the b	est of my knowled	ge and belief.		
, ,		1	•	_		
CICNIATURE () 1.1	5/2 M	mini n Drodu	otion Clark		DATE 5/28/00	•
SIGNATURE Jerry W.	Junes _	TITLE Produ	CHOIL CICLK		DATE <u>5/28/09</u>	
Type or print name Jerry W. Sherre	ell	E-mail addres	s: jerrys@macke	nergycorp.co	om PHONE: (575)748-1288
For State Use Only		_		***	<u> </u>	
ADDROVED BY:	·	TITLE	Godos:		DATE 64	1000
APPROVED BY: Conditions of Approval (if any):	u vouer	_TITLE	month 212		DATE ()/	10007