

Submit 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

Fonn C-103

March 4, 2004

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

WELL API NO. <b>30-025-01416</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>19615</b>
7. Lease Name or Unit Agreement Name <b>State 35</b>
8. Well Number <b>2</b>
9. OGRID Number <b>013837</b>
10. Pool name or Wildcat <b>Corbin;Abo</b>

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

2. Name of Operator

**Mack Energy Corporation**

3. Address of Operator

**P.O. Box 960, Artesia, NM 88211-0960**

4. Well Location

Unit Letter **N** **330** feet from the **South** line and **1650** feet from the **West** line

Section **35** Township **17S** Range **33E** NMPM County

11. Elevation (Show whether DR, RKB, RT, GR, etc)  
**4118' GR**

Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)

Pit Location: UL **N** Sect **35** Twp **17S** Rng **33E** Pit type **Workover** Depth to Groundwater **150** Distance from nearest fresh water well **2000'**

Distance from nearest surface water **1500'** Below-grade Tank Location UL Sect Twp Rng  
feet from the line and feet from the line

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENTJOB ☐

OTHER: ☐

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.

**Mack Energy Corporation is proposing to drill out the CIBP @ 4073', add addition holes to the already perforated Abo formation and acidize in an attempt to produce the State 35 #2 well. The pit will be located 15' North of the wellbore.**

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 ☒

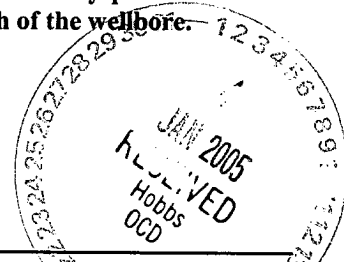
SIGNATURE **Jerry W. Sherrell** TITLE **Production Clerk** DATE **12/30/2004**

Type or print name **Jerry W. Sherrell** E-mail address: **jerrys@mackenergycorp.com** Telephone No. **(505)748-1288**

(This space for State use)

APPROVED BY **GARY W. WINK** TITLE **CC FIELD REPRESENTATIVE II/STAFF MANAGER** DATE **JAN 03 2005**

Conditions of approval, if any



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Oil Conservation Division  
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Form C-144  
March 12, 2004

For drilling and production facilities, submit to appropriate NMOCD District Office.  
For downstream facilities, submit to Santa Fe office

Pit or Below-Grade Tank Registration or Closure

Is pit or below-grade tank covered by a "general plan"? Yes ☒ No ☐

Type of action: Registration of a pit or below-grade tank ☒ Closure of a pit or below-grade tank ☐

Operator: **Mack Energy Corporation** Telephone: **(505)748-1288** e-mail address: **jerrys@mackenergycorp.com**  
Address: **P.O. Box 960, Artesia, NM 88211-0960**  
Facility or well name: **State 35 #2** API #: **30-025-01416** U/L or Qtr/Qtr **N** Sec. **35** T. **17S** R. **33E**  
County: **Lea** Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ NAD: 1927 ☐ 1983 ☐ Surface Owner Federal ☐ State ☒ Private ☐ Indian ☐

<b>Pit</b> Type: Drilling <input type="checkbox"/> Production <input type="checkbox"/> Disposal <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Emergency <input type="checkbox"/> Lined <input checked="" type="checkbox"/> Unlined <input type="checkbox"/> Liner type: Synthetic <input checked="" type="checkbox"/> Thickness <b>12</b> mil Clay <input type="checkbox"/> Volume <b>300</b> bbl	<b>Below-grade tank</b> Volume: _____ bbl Type of fluid: _____ Construction material: _____ Double-walled, with leak detection? Yes <input type="checkbox"/> If not, explain why not, _____	
Depth to ground water (vertical distance from bottom of pit to seasonal high water elevation of ground water.)	Less than 50 feet 50 feet or more, but less than 100 feet 100 feet or more	(20 points) (10 points) (0 points) <b>0 Points</b>
Wellhead protection area: (Less than 200 feet from a private domestic water source, or less than 1000 feet from all other water sources.)	Yes No	(20 points) (0 points) <b>0 Points</b>
Distance to surface water: (horizontal distance to all wetlands, playas, irrigation canals, ditches, and perennial and ephemeral watercourses.)	Less than 200 feet 200 feet or more, but less than 1000 feet 1000 feet or more	(20 points) (10 points) (0 points) <b>0 Points</b>
<b>Ranking Score (Total Points)</b>		<b>0 Points</b>

**If this is a pit closure:** (1) attach a diagram of the facility showing the pit's relationship to other equipment and tanks. (2) Indicate disposal location:

onsite ☐ offsite ☐ If offsite, name of facility \_\_\_\_\_ (3) Attach a general description of remedial action taken including remediation start date and end date. (4) Groundwater encountered: No ☐ Yes ☐ If yes, show depth below ground surface \_\_\_\_\_ ft. and attach sample results. (5) Attach soil sample results and a diagram of sample locations and excavations.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that the above-described 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 ☐

Date: **11/18/2004**

Printed Name/Title: **Jerry W. Sherrell/Production Clerk**

Signature: *Jerry W. Sherrell*

Your certification and NMOCD approval of this application/closure does not relieve the operator of liability should the contents of the pit or tank contaminate ground water or otherwise endanger public health or the environment. Nor does it relieve the operator of its responsibility for compliance with any other federal, state, or local laws and/or regulations.

Approval:

Date: **JAN 03 2005**

Printed Name/Title: \_\_\_\_\_

Signature: *Gary W. Wink*

**GARY W. WINK**  
**OCD FIELD REPRESENTATIVE II/STAFF MANAGER**

**12' Wide x 30' Long x 6' Deep  
Lined Workover/Plugging Pit**

