

Submitt 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. 30-025-37074 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. VB-623 |
| 7. Lease Name or Unit Agreement Name Perch State |
| 8. Well Number 2 |
| 9. OGRID Number 013837 |
| 10. Pool name or Wildcat Grayburg Jackson SR Q G SA |

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 _____

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 A 330 feet from the North line and 990 feet from the East line
Section 30 Township 16S Range 32E NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4359' GR

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: _____ <input type="checkbox"/> | | OTHER: <u>Spud and cement casings</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.

03/01/2005 Spud 12 1/4" hole @ 1:30 AM.

03/02/2005 TD 12 1/4" hole @ 427', RIH w/10 joints 8 5/8" J-55 24# set @ 420', Cemented w/675 sx Class C, 2% CC, tail in w/224 sx Class C, 2% CC, circ 165 sx, plug down @ 4:12 PM 3/1/05. WOC 18 hours tested casing to 1800# for 30 minutes, held OK.

03/12/2005 TD 7 7/8" hole @ 4270'.

03/14/2005 RIH w/98 joints 4 1/2" L-80 11/6# set @ 4250', Cemented w/2150 sx 50-50-2, 2% CC, 1% FL25, 1% BA10, 5% salt, 3% FL52, circ 209 sx, plug down @ 1:15 AM. WOC 12 hours tested casing to 600# for 20 minutes, held OK.

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 3/28/2005

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

APPROVED BY: Jerry W. Wink DATE _____
Conditions of Approval (if any):

TITLE FIELD REPRESENTATIVE II/STAFF MANAGER
MAR 30 2005