

Submit 1 Copy To Appropriate District Office

District I- (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II- (575) 748-1283  
1301 W. Grand Ave., Artesia, NM 88210  
District III- (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV- (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

HOBBS OCD

FEB 08 2014

State of New Mexico  
Energy, Minerals and Natural Resources  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103

Revised July 18, 2011

|                                                                                                                                                                                                        |  |                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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.) |  | WELL API NO.<br>30-025-30548                                                                        |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>                                                                         |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br>Mack Energy Corporation                                                                                                                                                         |  | 6. State Oil & Gas Lease No.<br>K-385                                                               |
| 3. Address of Operator<br>P.O. Box 960 Artesia, NM 88210                                                                                                                                               |  | 7. Lease Name or Unit Agreement Name<br>STATE 35                                                    |
| 4. Well Location<br>Unit Letter K 2310 feet from the South line and 1980 feet from the West line<br>Section 35 Township 17S Range 33E NMPM County Lea                                                  |  | 8. Well Number<br>5                                                                                 |
| 11. Elevation (Show whether DR, RKB, RT, GR etc.)<br>4121' GR                                                                                                                                          |  | 9. OGRID Number<br>013837                                                                           |
|                                                                                                                                                                                                        |  | 10. Pool Name or Wildcat<br>Corbin; Queen                                                           |

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"/>      |                                          |
| DOWNHOLE COMMINGLE <input type="checkbox"/>    |                                           |                                                 |                                          |
| CLOSED-LOOP SYSTEM <input type="checkbox"/>    |                                           |                                                 |                                          |
| OTHER: <input type="checkbox"/>                | Re-Completion <input type="checkbox"/>    | OTHER: <input 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Mack Energy Corporation proposes to do the following:

1. POH w/ rods and pump
2. NU BOP
3. POH w/ tbg
4. Set CIBP w/ 35' cmt cap @ 4000'
5. Shoot 3rd set of perfs 3870-3888'
6. RIH w/ RTTS pkr
7. Pump 1500gal 15% HCL ball job
8. Swab and evaluate
9. If zone looks productive proceed w/ frac.

|            |  |                   |  |
|------------|--|-------------------|--|
| Spud Date: |  | Rig Release Date: |  |
|------------|--|-------------------|--|

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

SIGNATURE Deana Weaver TITLE Production Clerk DATE 2-6-14

Type or print name Deana Weaver E-mail address: dweaver@mec.com PHONE: 575-748-1288

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE FEB 10 2014  
Conditions of Approval (if any):

FEB 10 2014