

Submit To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1090 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 Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505	<div style="text-align: right;"> Form C-105 Revised August 1, 2011 </div> <div style="font-size: 2em; font-family: cursive; transform: rotate(-10deg); position: absolute; top: -20px; right: 0;">2nd Copy</div> 1. WELL API NO. 30-025-39673 2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN 3. State Oil & Gas Lease No. E-6002								
WELL COMPLETION OR RECOMPLETION REPORT AND LOG										
4. Reason for filing: <input checked="" type="checkbox"/> COMPLETION REPORT (Fill in boxes # 1 through #31 for State and Fee wells only) <input type="checkbox"/> C-144 CLOSURE ATTACHMENT (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)		5. Lease Name or Unit Agreement Name B Lee State 6. Well Number: <div style="text-align: right; font-size: 1.5em; font-weight: bold;">OCT 03 2017</div>								
7. Type of Completion: <input type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input checked="" type="checkbox"/> PLUGBACK <input checked="" type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER		<div style="text-align: right; font-size: 1.5em; font-weight: bold; color: blue;">RECEIVED</div>								
8. Name of Operator Mack Energy Corporation		9. OGRID 013837								
10. Address of Operator P.O. Box 960, Artesia, NM 88210		11. Pool name or Wildcat Vacuum; Blinebry- 61850								
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	L	7	18S	35E		2210	South	430	West	Lea
BH:	L	7	18S	35E		2269	South	348	West	Lea
13. Date Spudded 1/24/2017	14. Date T.D. Reached 2/3/2017	15. Date Rig Released 2/7/2017		16. Date Completed (Ready to Produce) 2/7/2017		17. Elevations (OF and RKB, RT, GR, etc.) 3976' GR				
18. Total Measured Depth of Well 9095'		19. Plug Back Measured Depth 6774'		20. Was Directional Survey Made? No		21. Type Electric and Other Logs Run				
22. Producing Interval(s), of this completion - Top, Bottom, Name Vacuum; Blinebry- 61850										
23. CASING RECORD (Report all strings set in well)										
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED					
8 5/8" J-55	24	1616'	12 1/4	760sx	None					
5 1/2" J-55	17	9095'	7 7/8	1780sx	None					
24. LINER RECORD										
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	25. TUBING RECORD					
					SIZE	DEPTH SET	PACKER SET			
					2 7/8"	6480'				
26. Perforation record (interval, size, and number) CIBP @ 6809' w/ 35' cmt top 6326-6489', 41, 40 holes 6112-6305.5', 41, 40 holes					27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED 6112-6489' See C-103 for details					
28. PRODUCTION										
Date First Production 2/7/2017		Production Method (Flowing, gas lift, pumping - Size and type pump) 2 1/2 x 2 x 20' pump				Well Status (Prod. or Shut-in) Producing				
Date of Test 2/21/17	Hours Tested 24 hours	Choke Size	Prod'n For Test Period	Oil - Bbl 72	Gas - MCF 50	Water - Bbl 300	Gas - Oil Ratio 694			
Flow Tubing Press	Casing Pressure	Calculated 24- Hour Rate	Oil - Bbl 72	Gas - MCF 50	Water - Bbl 300	Oil Gravity - API - (Corr.) 38.80				
29. Disposition of Gas (Sold, used for fuel, vented, etc) Sold							30. Test Witnessed By Robert Chase			
31. List Attachments										
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.										
33. If an on-site burial was used at the well, report the exact location of the on-site burial:										
Latitude _____ Longitude _____ NAD 1927 1983										
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief										
Signature <u>Deana Weaver</u>		Name <u>Deana Weaver</u>			Title <u>Production Clerk</u>			Date <u>2.22.17</u>		Printed
E-mail Address <u>dweaver@mec.com</u>										

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

OIL OR GAS
SANDS OR ZONES

IMPORTANT WATER SANDS

No. 1, from	to	feet
No. 2, from	to	feet
No. 3, from	to	feet

LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology