Subtitit 3 Copies To Appropriate District	State of New Mexico				Form C-103	
Office District I	Energy, Minerals and Natural Resources			WELL API NO.	May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240				30-025-27979		
District 11 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION			5. Indicate Type	of Lease	
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.				FEE	
District IV	Santa Fe, NM 87505			6. State Oil & Ga	s Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505					LG-7131	
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name or	r Unit Agreement Name	
(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				Lea ZO State		
PROPOSALS.)				8. Well Number 1		
1. Type of Well: Oil Well Gas Well Other				9. OGRID Number		
2. Name of Operator  Mack Energy Corporation				013837		
3. Address of Operator				I 0. Pool name or Wildcat		
P. O. Box 960 Artesia, NM 88211-0960				Maljamar Grbg SA		
4. Well Location West						
Unit Letter N 330 feet from the South line and 2310 feet from the West line  Section 35 Township 16S Range 32E NMPM County Lea, NM						
Section Range Name Odates						
I 1. Elevation (Show whether DR, RKB, RT, GR, etc.) 4264' GL						
Pit or Below-grade Tank Application or Closure						
Pit type Plugging Depth Groundwater 205' Distance from nearest fresh water well 1000' Distance from nearest surface water 1000'						
Pit Liner Thickness: 12 mil Below-Grade Tank: Volume bb1s; Construction Material						
	Appropriate Box to Ind	licate Na	ature of Notice	. Report or Other	Data	
NOTICE OF INCIDENCE OF I				BSEQUENT RE	PORT OF: ALTERING CASING []	
PERFORM REMEDIAL WORK				RILLING OPNS.	P AND A	
TEMPORARILY ABANDON		H	CASING/CEME	_		
PULL OR ALTER CASING L	7azı z	_			-	
OTHER:	(01 1		OTHER: Pit Clo	nd since mentinent det	ton including againsted date	
13. Describe proposed or com of starting any proposed	pleted operations. (Clearly work). SEE RULE 1103. Fo	state all p or Multipl	e Completions: A	nd give pertinent dat ttach wellbore diagr	ram of proposed completion	
or recompletion.						
The above mentioned pit has been closed the encapsulation is located 30' West of the well bore.						
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					\$55. 150°°	
					61-10	
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 Leny W.	1 / 1		oduction Clerk		DATE 4/24/07	
Type or print name Jerry W. Sher	rell E	mail addr	ess jerrvs@mack	cenergycorp.com	Telephone No. (505)748-1288	
Type or print name Jerry W. Sher For State Use Only	D-	man duul	Coo. <u>3 J ~ Collinor</u>		retephone No. X 1/112 2200	
H	1 1 1				,	
APPROVED BY: Hayle	1. Wante of	THEED	REPRESENTATIV	/E II/STAFF MANA		
Conditions of Approval (if thy):					IAPR 3 0 200	