

5/3/07 1184

PC-1184 RECEIVED

CLP071303000

Submit Copies To Appropriate District Office  
District I  
1625 N. Frothingham, Hobbs, NM 88240  
District II  
1304 W. Gmd Ave., Artesia, NM 88210  
District III  
1000 Rio Bazar 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  
Oil Conservation Division  
1220 S. St. Francis Drive  
Santa Fe, NM 87505

WELL API NO. Multiple
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-10784
7. Lease Name or Unit Agreement Name Raven State
8. Well Number 1,2,3,4
9. OGRID Number 013837
10. Pool name or Wildcat Vacuum; Bone Spring, West/Vacuum GB/SA
Pit or Belowgrade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>
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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator Mack Energy Corporation
3. Address of Operator P. O. Box 960 Artesia, NM 88211-0960
4. Well Location Unit Letter _____ feet from the _____ line and _____ feet from the _____ line Section <u>9</u> Township <u>18S</u> Range <u>34E</u> NMPM County <u>Lea</u> 11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <u>Surface commingle &amp; off lease measurement</u> <input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: _____ <input type="checkbox"/>
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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 as operator respectfully requests administrative approval for a permit to surface commingle and off lease measurement of production. It is requested that surface commingling of Vacuum; Grayburg-San Andres and Vacuum; Bone Spring, West pools be approved for the following lease:  
Raven State Sec. 9, T18S, R34E, B-10784

Raven State wells #1, 2 and 3 are GB/SA wells. The Raven State #4 is currently a Bone Spring producer. We anticipate a workover to DHC the Bone Spring and GB/SA soon. A central tank battery for the #1,2 & 3 wells is located in the SW/4 NE/4, Sec. 9 T18S R34E. The Tank Battery for the #4 is located in the SW/4 NW/4 Sec. 9 T18S R34E. Proper allocation for gas production will be measured with meters at each battery, then sent to DCP's Raven State sales meter at the Crow State TB located in the NW/4 SE/4 Sec. 9 T18S R34E. Mack Energy Corporation has made notification to all parties owning an interest in these leases, including the gas purchaser, of the intent to commingle. The interests in all pools on this lease are common.

(Gas only) (PC-1184)

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 NMOC guidelines ☐ a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Jerry W. Sherrell TITLE Production Clerk DATE 4/17/07

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

For State Use Only

APPROVED BY: Will [Signature] TITLE Engineer DATE 5/17/07

Conditions of Approval (if any):