

DISTRICT I
P O Box 1980, Hobbs NM 88240

DISTRICT II
811 South First, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

RECEIVED
CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, New Mexico 87505
APR 15 2009

HOBBS

WELL API NO. 30-025-39154
5 Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6 State Oil & Gas Lease No. E-6002
7 Lease Name or Unit Agreement Name B Lee State
8 Well No 10
9 Pool name or Wildcat Mid-Vacuum Devonian
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3974.3

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 <input checked="" type="checkbox"/> GAS <input type="checkbox"/> WELL <input type="checkbox"/> 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 <u>F</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>2050</u> Feet From The <u>West</u> Line Section <u>7</u> Township <u>18S</u> Range <u>35E</u> NMPM <u>Lea</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3974.3	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☒ Name Change

12. 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.

Change well name from Treasure Trunk #1 to the B Lee State #10 effective 4/1/09.

OPER. OGRID NO. 13837
PROPERTY NO. 33654
POOL CODE _____
EFF. DATE 04-01-09
API NO. 30-25-39154

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

SIGNATURE Crissa D. Carter TITLE Production Analyst DATE 4/14/09
TYPE OR PRINT NAME Crissa D. Carter TELEPHONE NO 575-748-1288

(This space for State Use)

APPROVED BY [Signature] TITLE PETROLEUM ENGINEER DATE JUN 04 2009
CONDITIONS OF APPROVAL, IF ANY