

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division  
1625 N. French Dr.  
Hobbs NM 88240

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

FORM APPROVED  
OMB No 1004-0137  
Expires: July 31, 2010

SUBMIT IN TRIPLICATE - Other instructions on page 2		7 If Unit of CA/Agreement, Name and/or No.
1 Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Re- Entry		8 Well Name and No PEERY SWD #4
2 Name of Operator Mack Energy Corporation		9 API Well No 30-005-20333
3a Address P.O. Box 960 Artesia, NM 88210-0960	3b. Phone No (include area code) (575) 748-1288	10 Field and Pool or Exploratory Area SWD; Devonian
4 Location of Well (Footage, Sec, T,R,M, or Survey Description) 660 FNL & 990 FEL Sec. 29 T15S R30E		11 Country or Parish, State Chaves, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Completion
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13 Describe Proposed or Completed Operation Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones Attach the Bond under which the work will be performed or provide the Bond No on file with BLM/BIA Required subsequent reports must be filed within 30 days following completion of the involved operations If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection )

11/17/2008 Start Drilling Plugs.

11/25/2008 Acidize w/ 1,000 gals 15% HCL @ 11463'.

11/26/2008 Acidize w/ 1,000 gals 15% HCL @ 11778'.

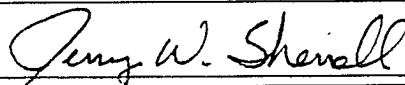
12/2/2008 RIH w/ 346jts 2 7/8" tubing, set packer @ 11077'. Load hole w/ packer fluid and tested to 500# for 30 minutes. See enclosed chart.

12/3/2008 Acidize w/ 10,000 gals 20% HCL.

**RECEIVED**

JAN 05 2009

**HOBBSOCD**

14 I hereby certify that the foregoing is true and correct Name (Printed/Typed) Jerry W. Sherrell		Title Production Clerk
Signature 		Date 12/05/2008

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by <b>/S/ JOHN S. SIMITZ</b>	Acting Assistant Field Manager, Lands And Minerals	Date <b>DEC 22 2008</b>
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon		Office <b>ROSWELL FIELD OFFICE</b>

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for my person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO 1004-0137  
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input checked="" type="checkbox"/> Other						5 Lease Serial No NMNM-119274			
b Type of Completion. <input type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff Resrv. Other Re-Entry						6 If Indian, Allottee or Tribe Name			
2 Name of Operator Mack Energy Corporation ✓ 4138377						7 Unit or CA Agreement Name and No			
3. Address P.O. Box 960 Artesia, NM 88210						8 Lease Name and Well No PEERY SWD 20036			
3a Phone No (include area code) (575) 748-1288						9 API Well No 30-005-20333			
4 Location of Well (Report location clearly and in accordance with Federal requirements)*  At surface 660 FNL & 990 FEL  At top prod interval reported below  At total depth						10 Field and Pool or Exploratory SWD; Devonian 96101 11 Sec, T, R, M., on Block and Survey or Area Sec. 29 T15S R30E			
14 Date Spudded 11/17/2008						15 Date T D Reached 12/04/2008		16 Date Completed <input type="checkbox"/> D&A <input checked="" type="checkbox"/> Ready to Prod	
18 Total Depth MD TVD 11,796'						19 Plug Back T D MD TVD 11,796		20 Depth Bridge Plug Set MD TVD	
21 Type Electric & Other Mechanical Logs Run (Submit copy of each)						22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit report) Directional Survey? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit copy)			
23 Casing and Liner Record (Report all strings set in well)									
Hole Size	Size/Grade	Wt (#/ft)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No of Sks & Type of Cement	Slurry Vol (BBL)	Cement Top*	Amount Pulled
13 3/4	11 3/4	42	0	454	434	290sx		0	None
10 5/8	8 5/8	32	0	5,000	5,000	1100sx		0	None
7 7/8	5 1/2	17 & 20	4791'	11,150	11,150	1800sx		7875'	None
24 Tubing Record									
Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	
2 7/8	11,077	11,077							
25 Producing Intervals									
Formation		Top	Bottom	Perforation Record		Size	No Holes	Perf Status	
A) SWD; Devonian		11,150	11,796					Open Hole	
B)									
C)									
D)									
27 Acid. Fracture, Treatment Cement Squeeze, etc									
Depth Interval		Amount and Type of Material							
11,150-11,796' Open Hole		See 3160-5 for details							
28 Production Interval A									
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press Flwg SI	Csg Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						
28a. Production Interval B									
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press Flwg SI	Csg Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

\*(See instructions and spaces for additional data on page 2)

## 28b Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr API	Gas Gravity	Production Method
			→						
Choke Size	Tbg Press Flwg SI	Csg Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

## 28c Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr API	Gas Gravity	Production Method
			→						
Choke Size	Tbg Press Flwg SI	Csg Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

29 Disposition of Gas (Solid used for fuel vented etc)

## 30 Summary of Porous Zones (Include Aquifers)

Show all important zones of porosity and contents thereof Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries

## 31 Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc	Name	Top
					Meas Depth
				Abo	6490
				Wolfcamp	7708
				Atoka	9543
				Morrow	10024
				Lower Miss.	10510
				Devonian	11070

32 Additional remarks (include pugging procedure)

33 Indicate which items have been attached by placing a check in the appropriate boxes

- ☐ Electrical/Mechanical Logs (1 full set req'd)
 ☐ Geologic Report
 ☐ DST Report
 ☐ Directional Survey
- ☐ Sundry Notice for plugging and cement verification
 ☐ Core Analysis
 ☐ Other

34 I hereby certify that the foregoing and attached information is complete as determined from all available records (see attached instruction)\*

Name (please print) Jerry W. SherrellTitle Production Clerk

Signature

Jerry W. Sherrell

Date

12/05/2008

Title 18 U S C Section 1001 and Title 43 U S C Section 1212, make it a crime for my person knowingly and willfully to make to my department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

(Continued on page 3)

(Form 3160-4, page 2)

