State of New Mexico Energ,, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

Form	C-	103	
Revis	ed l	-1-	89

DISTRICT I OI	WELL API NO.		
O. Box 1980, Hobbs NM 88240 2040 South Pacheco		30-025-30065	
DISTRICT II Santa Fe, New Mexico 87505 811 South First, Artesia, NM 88210		5. Indicate Type of Lease STATE FEE FEE	
DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410		6. State Oil & Gas Lease No. E-9118	
SUNDRY NOTICES AND REPORTS ON WELLS		\$4 (\$10)	
(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).		7. Lease Name or Unit Agreement Name	
1. Type Of Well: OIL GAS GAS WELL WELL	OTHER	Wiser 29 State Comm	
2. Name of Operator		8. Well No.	
Mack Energy Corporation		9. Pool name or Wildcat	
3. Address of Operator P.O. Box 960, Artesia, NM 88211-0960	•	Lovington Penn, Northeast	
4 Well Location		West	
Unit Letter L: 1980	Feet From The South Line and	660 Feet From The West Line	
20	16S - 37E	NMPM Lea County	
Section	Township Range 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3808.3 GR	an A	
Check Ann	ropriate Box to Indicate Nature of Notice,	Report, or Other Data	
NOTICE OF INTEN		IBSEQUENT REPORT OF:	
		ALTERING CASING	
PERFORM REMEDIAL WORK	FEOGRANDING INDON	NG OPNS PLUG AND ABANDONMENT	
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRILLI		
PULL OR ALTER CASING	CASING TEST AND	CEMENT JOB	
OTHER:	OTHER		
12. Describe Proposed or Completed Opera work) SEE RULE 1103.	ations (Clearly state all pertinent details, and give pertinent dates,	, including estimated date of starting any proposed	
9.5 mud between all plugs MIRU 12/16/98			
1. 5 1/2 CIBP @ 10,800' w/35' cement.			
2. 25sx @ 8000'			
3. 45sx across 5 1/2 stub @ 6000' spot @ 60	50' WOC tag TOC 5890'		
4. 35sx 4850'-4720'			
5. 45sx across 8 5/8 shoe 4244' spot plug @	4294' WOC Tag TOC 4167'		
6. 35sx 2200'-2070'			
7. 50sx 421'-250'			
8. 20sx surf.			
12/23/98 Install Dry Hole Marker RDMO		•	
8 5/8 cement circ to surf.			
I hereby certify that the information above is true and	complete to the best of my knowledge and belief.		
SIGNATURE LAST.	TITLE Produc	ction Analyst 4/20/00	
TYPE OR PRINT NAME.	Crissa D. Carter	TELEPHONE NO. (505)748-1288	
(This was for State Une)		MAY 3.2 2000	
(This space for State Use)	11.	DATE	