

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE\*  
\*other in-  
struction on  
reverse side)

FOR APPROVED  
OMB NO. 1004-0137  
Expires: December 31, 1991

6. LEASE DESIGNATION AND SERIAL NO.  
LC-029509-A

WELL COMPLETION OR RECOMPLETION REPORT

1a. TYPE OF WELL:

OIL WELL ☒ GAS WELL ☐ DRY ☐ Other

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other

2. NAME OF OPERATOR

Mack Energy Corporation

3. ADDRESS AND TELEPHONE NO.

P.O. Box 960, Artesia, NM 88211-0960

(505) 748-1288

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

At surface

2160 FNL 2310 FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR  
PARISH  
Lea

13. STATE  
NM

15. DATE SPUDDED  
1/26/00

16. DATE T.D. REACHED  
2/6/00

17. DATE COMPL. (Ready to prod.)  
3/23/00

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)  
4067 RKB

19. ELEV. CASING HEAD  
4055

20. TOTAL DEPTH, MD & TVD  
5952

21. PLUG, BACK T.D., MD & TVD  
5905

22. IF MULTIPLE COMPL.,  
HOW MANY\*

23. INTERVALS  
DRILLED BY

ROTARY TOOLS  
Yes

CABLE TOOLS

24. PRODUCING INTERVAL (S), OF THIS COMPLETION - TOP, BOTTOM, NAME (MD AND TVD)\*

5588-5653.5 Paddock

25. WAS DIRECTIONAL  
SURVEY MADE  
Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray, Neutron, Density, Lateralog, Spectral Gamma Ray

27. WAS WELL CORED  
No

28. CASING RECORD (Report all strings set in well)

CASING SIZE/GRADE	WEIGHT, LB./FT	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
13 3/8	48	329	17 1/2	425 sx	None
8 5/8	32	2262	12 1/4	750 sx	None
5 1/2	17	5917	7 7/8	1075 sx	None

29. LINER RECORD

SIZE	T O P (MD)	BOTTOM (MD)	SACKS CEMENT	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 7/8	5675	

31. PERFORATION RECORD (Interval, size and number)

5588-5653.5, 0.41, 24

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5588-5653.5	8000 gals 20% acid
5588-5653.5	13,500 gals 40# gel
5588-5653.5	20,00 gals 15% acid

33. PRODUCTION

DATE FIRST PRODUCTION 4/21/00		PRODUCTION METHOD (Flowing, gas lift, pumping - size and type of pump) 2 1/2 x 2 x 16' HVR				WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 4/21/00	HOURS TESTED 24	CHOKE SIZE	PROD'N FOR TEST PERIOD	OIL-BBL. 11	GAS-MCF. 9	WATER-BBL. 745	GAS-OIL RATIO 819
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL-BBL. 11	GAS-MCF. 9	WATER - BBL. 745	OIL GRAVITY - API (CORR.) 38	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Sold

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

*Crisa D. Carter*

TITLE

Production Analyst

DATE

5/2/00

\*(See Instructions and spaces for Additional Data on Reverse Side)

Title 18 U.S.C. Section 1001, makes it a crime for any 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.

*Scal*

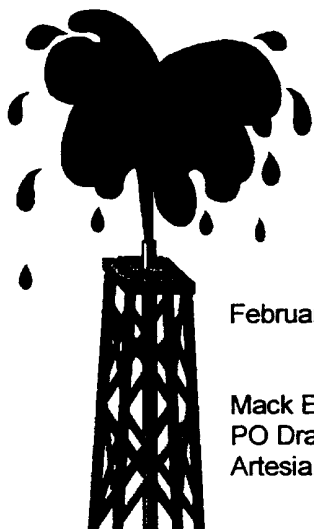
37. SUMMARY OF POROUS ZONES- (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Maljammar Paddock	5421	5760	

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS.DEPH	TRUE VERT.DEPH
Queen	3128	
San Andreas	3855	
Glorietta	5366	

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2000 MAY -4 A 10:13  
HOSPITAL OF HOPE



# Artesia Fishing Tool Co., Inc.

Oil Well Drilling Contractors  
PO Box 1370 Artesia, NM 88211-1370  
505/746-6651 746-3518 fax 748-2205

February 17, 2000

Mack Energy Corporation  
PO Drawer 960  
Artesia, NM 88211-0960

RE: M C Federal #3  
2160' FNL & 2310' FWL  
Sec. 21, T17S, R32E  
Lea County, New Mexico

Gentlemen:

The following is a Deviation Survey for the above captioned well.

DEPTH	DEVIATION
335'	1/2°
840'	1°
1331'	1/2°
1850'	1 1/2°
2326'	1°
2855'	1°
3319'	1°
3816'	1 1/4°
4335'	1 1/4°
4839'	1 3/4°
5355'	1 1/2°
5950'	1°

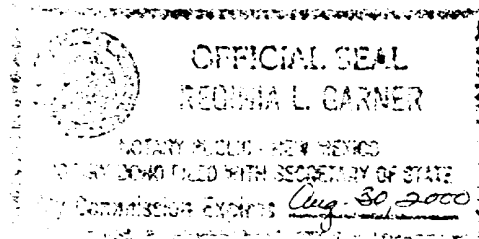
Very truly yours,

Eddie C. LaRue  
Vice President

STATE OF NEW MEXICO }  
COUNTY OF EDDY }

The foregoing was acknowledged before me  
this 17th day of February, 2000.

\_\_\_\_\_  
Notary Public



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*Serving Southeast New Mexico and West Texas Since 1974*

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UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division  
811 S. 1st Str  
Artesia, NM 88210-2834

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

**1. Type of Well**

☒ Oil Well ☐ Gas Well ☐ Other

**2. Name of Operator**

Mack Energy Corporation

**3. Address and Telephone No.**

P.O. Box 960, Artesia, NM 88211-0960 (505)748-1288

**4. Location of Well (Footage, Sec., T. R., M. or Survey Description)**

Sec. 21-T17S-R32E 2160 FNL & 2310 FWL

**5. Lease Designation and Serial No.**

LC-029509-A

**6. If Indian, Allottee or Tribe Name**

**7. If Unit or CA, Agreement Designation**

**8. Well Name and No.**

MC Federal #3

**9. API Well No.**

30-025-34773

**10. Field and Pool, or Exploratory Area**

Maljamar Paddock

**11. County or Parish, State**

Lea, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other <u>Completion</u>	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

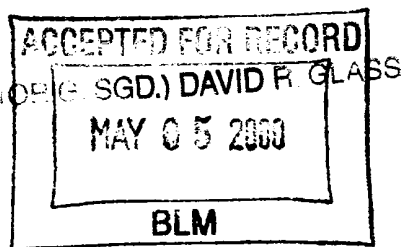
**13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work)\***

3/20/2000 Drill out and DV tool, and perfed Casing at 5588-5653.5 24-holes 0.41 hole, SDFD.

3/21/2000 Acidized perfs w/1200 gals 15% NE Acid.

3/22/2000 Reacidized perfs 5588-5653.5', w/8,000 gals 20% acid, 13,500 gals 40# gel, 20,00 gals 15% acid.

3/23/2000 RIH with new 2 7/8" Prod. Tubing 8rd EUE SN at 5675 with 189 joints, RIH with 2 1/2 x 2 x 20' HVR Brass Nicarb PAP pump. Moving in Lufkin 640 pumping unit.



**14. I hereby certify that the foregoing is true and correct**

Signed

*Crossa D. Carter*

Title

Production Analyst

Date

5/2/00

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

*DAVID R. GLASS*  
SUPERVISOR

Date

5/2/00

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•See Instruction on Reverse Side

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