

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DO, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

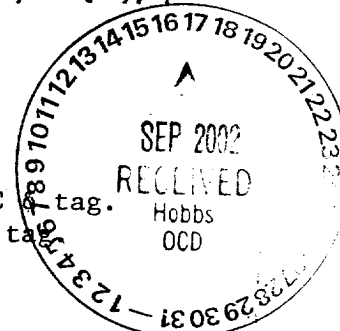
WELL API NO. 30-025-23245
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name State SS
8. Well No. 1
9. Pool name or Wildcat

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 ☒ Gas ☐ Other ☐	
2. Name of Operator Mack Energy Corporation	
3. Address of Operator P.O. Box 960, Artesia, NM 88211-0960	
4. Well Location Unit Lease <u>F</u> : 1980 Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line Section <u>24</u> Township <u>17-S</u> Range <u>R-36-E</u> NMMPM Lea <u>"</u> County <u></u>	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3806'	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
PLUG AND ABANDON ☒	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☐
CHANGE PLANS ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☐
OTHER: ☐	OTHER: ☐

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.

- MIRU.
- Set 5-1/2" CIBP @ 5062', cap w/ 35' of cement.
- Circulate hole w/ 9.5# MLF.
- Perforate 5-1/2" csg. @ 1990', sqz perfs w/ 35 sx 1990-1890', WOC & tag.
- Perforate 5-1/2" csg. @ 382', sqz. perfs w/ 35 sx 382-282', WOC & tag.
- Spot 10 sx cmt. 60-3'.
- Cut off wellhead & install dry hole marker.



THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.

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

SIGNATURE Cassi D. Cant TITLE Production Analyst DATE 9/16/02

TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use) ORIGINAL SIGNED BY

GARY W. WINK

APPROVED BY OC FIELD REPRESENTATIVE II / STAFF MANAGER TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

SEP 18 2002