

Submit To Appropriate District Office State Lease - 6 copies Fee Lease - 5 copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505	Form C-105 Revised June 10, 2003 WELL API NO. 30-015-33089 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> State Oil & Gas Lease No. B2613																								
WELL COMPLETION OR RECOMPLETION REPORT AND LOG																										
1a. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER _____ b. Type of Completion: NEW <input type="checkbox"/> WORK <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG <input type="checkbox"/> DIFF. WELL OVER BACK RESVR. <input type="checkbox"/> OTHER RE-ENTRY		7. Lease Name or Unit Agreement Name <div style="text-align: right; font-weight: bold; font-size: 1.2em;">RECEIVED</div> OXY SPUMONI STATE <div style="text-align: right; font-weight: bold; font-size: 1.2em;">JUL 16 2004</div> <div style="text-align: right; font-weight: bold; font-size: 1.2em;">OCC-ARTESIA</div>																								
2. Name of Operator MARBOB ENERGY CORPORATION		8. Well No. 1																								
3. Address of Operator PO BOX 227, ARTESIA, NM 88211-0227		9. Pool name or Wildcat FREN; CISCO-CANYON																								
4. Well Location Unit Letter P : 990 Feet From The SOUTH Line and 990 Feet From The EAST Line Section 16 Township 17S Range 31E NMPM EDDY County																										
10. Date Spudded 12/18/03	11. Date T.D. Reached 4/24/04	12. Date Compl. (Ready to Prod.) 5/24/04																								
13. Elevations (DF& RKB, RT, GR, etc.) 3844' GL		14. Elev. Casinghead																								
15. Total Depth 9917'	16. Plug Back T.D. 9802'	17. If Multiple Compl. How Many Zones?																								
18. Intervals Drilled By 0 - 9917'		19. Producing Interval(s), of this completion - Top, Bottom, Name 9603' - 9618' CISCO-CANYON (PENN)																								
20. Was Directional Survey Made NO		21. Type Electric and Other Logs Run NONE																								
22. Was Well Cored NO		23. CASING RECORD (Report all strings set in well)																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>CASING SIZE</th> <th>WEIGHT LB./FT.</th> <th>DEPTH SET</th> <th>HOLE SIZE</th> <th>CEMENTING RECORD</th> <th>AMOUNT PULLED</th> </tr> <tr> <td>13 3/8"</td> <td>54.5#</td> <td>650'</td> <td>17 1/2"</td> <td>715 SX</td> <td>NONE</td> </tr> <tr> <td>9 5/8"</td> <td>36/40#</td> <td>5235'</td> <td>12 1/4"</td> <td>2650 SX</td> <td>NONE</td> </tr> <tr> <td>5 1/2"</td> <td>17#</td> <td>9864'</td> <td>7 7/8"</td> <td>1350 SX</td> <td>NONE</td> </tr> </table>	CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	13 3/8"	54.5#	650'	17 1/2"	715 SX	NONE	9 5/8"	36/40#	5235'	12 1/4"	2650 SX	NONE	5 1/2"	17#	9864'	7 7/8"	1350 SX	NONE	24. PRODUCION Date First Production _____ Production Method (Flowing, gas lift, pumping - Size and type pump) _____ Well Status (Prod. or Shut-in) SHUT-IN WAITING ON SWD CONVERSION (SWD-917)	
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED																					
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25. PERFORATION RECORD SIZE TOP BOTTOM SACKS CEMENT SCREEN _____ _____ _____	26. Perforation record (interval, size, and number) 9603' - 9618' (32 SHOTS)																									
27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED 9603' - 9618' ACDZ W/ 1000 GAL FAIR CHK S/C																										
28. PRODUCTION Date of Test _____ Hours Tested _____ Choke Size _____ Prod'n For Test Period _____ Oil - Bbl _____ Gas - MCF _____ Water - Bbl. _____ Gas - Oil Ratio _____																										
29. Disposition of Gas (Sold, used for fuel, vented, etc.) SHUT-IN WAITING ON SWD CONVERSION (ADMIN ORDER SWD-917)	Test Witnessed By _____																									
30. List Attachments NONE																										
31. I hereby certify that the information shown on both sides of this form as true and complete to the best of my knowledge and belief																										
Signature Printed Name DIANA J. CANNON Title PRODUCTION ANALYST Date 7/15/04																										
E-mail Address PRODUCTION@MARBOB.COM																										