

Submit 3 Copies To Appropriate District Office
 District I
 1625 N French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., 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

Form C-103
 May 27, 2004

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-25055
 5. Indicate Type of Lease
 STATE FEE
 6. State Oil & Gas Lease No.

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 Well Gas Well Other
 2. Name of Operator NMOCA for Marks and Carner
 3. Address of Operator _____
 4. Well Location
 Unit Letter K : 2310 feet from the S line and 1650 feet from the W line
 Section 5 Township 17S Range 29E NMPM Eddy County
 11. Elevation (Show whether DR, RKB, RT, GR, etc.) _____

7. Lease Name or Unit Agreement Name
Red 12 St
 8. Well Number 6
 9. OGRID Number _____
 10. Pool name or Wildcat
Cave CB/SA

Pit or Below-grade Tank Application or Closure
 Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
 Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 1) Set 3 1/2 CIBP @ ^{2956'} 2883' 26 SX cmt on top.
- 2) ~~Part + spot 355x @ 1975' (TAG)~~
- 3) ~~Part + spot 50sc from 403' to surface~~ 698'
- 4) Install Dry hole Marker

Notify OCD 24 hrs. prior
 To any work done.

Approval Granted providing work
 is complete by 7/24/09

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Mark Ad TITLE agent for NMOCD DATE 4/23/09

Type or print name _____ E-mail address: _____ Telephone No. _____

APPROVED BY: Phil Harker TITLE Compld off DATE 4/24/09
 Conditions of Approval (if any): _____