RM

Submit 1 Copy To Appropriate District Form C-103 State of New Mexico Office October 13, 2009 Energy, Minerals and Natural Resources District I WELL API NO. 1625 N French Dr , Hobbs, NM 88240 30-015-01711 District II OIL CONSERVATION DIVISION 1301 W Grand Ave, Artesia, NM 88210 7. Indicate Type of Lease District III 1220 South St. Francis Dr. STATE STATE STATE 1000 Rio Brazos Rd, Aztec, NM 87410 Santa Fe, NM 87505 7. State Oil & Gas Lease No. District IV 1220 S St Francis Dr, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A Lara Michelle DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH 8. Well Number PROPOSALS.) 5 1. Type of Well: Oil Well Gas Well Other JUN - 1 2010 9. OGRID Number 2. Name of Operator 14049 Marbob Energy Corporation NMOCD ARTESIA 3. Address of Operator 10. Pool name or Wildcat Artesia: Glorieta-Yeso (O) P.O. Box 227, Artesia, NM 88211-0227 4. Well Location 1965 feet from the South line and 330 feet from the West Unit Letter line 34 Township 17S Range 28E **NMPM** Eddy County Section 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3662' GR 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK □ PLUG AND ABANDON REMEDIAL WORK ALTERING CASING □ П TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB DOWNHOLE COMMINGLE OTHER: OTHER: Name Change 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. Please change the name of this well From: Lara Michelle State #5 (Property Code #38109) To: Lara Michelle #5 (Property Code #18790) Effective Date: August 19, 2009 Spud Date: Rig Release Date: tify that the information above is true and complete to the best of my knowledge and belief. SIGNATUR TITLE Production Manager DATE 5/28/10 Diana Type or print name E-mail address: dbriggs@marbob.com PHONE: <u>575-748-3303</u> For State Use Only APPROVED BY: **TITLE** Conditions of Approval (if any):