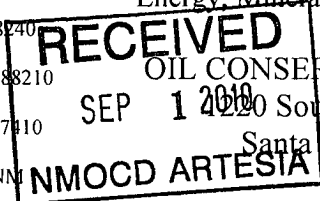


State of New Mexico
Energy, Minerals and Natural Resources

Form C-103

October 13, 2009



OIL CONSERVATION DIVISION

220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-015-25513

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

B-2071

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

Marbob Energy Corporation

3. Address of Operator

PO Box 227, Artesia, NM 88211-0227

4. Well Location

Unit Letter F : 2272 feet from the North line and 1750 feet from the West lineSection 27 Township 17S Range 28E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

3565' GR

7. Lease Name or Unit Agreement Name

NG Phillips State

8. Well Number

38

9. OGRID Number

14049

10. Pool name or Wildcat

Artesia; Queen-Grayburg-San Andres

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
 TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
 DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS. ☐ P AND A ☐
 CASING/CEMENT JOB ☐

OTHER: ☐OTHER: Recomplete-Same Zone (Add Perfs) ☒

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.

Recompleted in the Grayburg & San Andres zones as follows:

7/22/10 - MIRU.

7/23/10 - POOH w/ rods & pump. POOH w/ tbg. Perf the Grayburg & San Andres zones @ 1932' - 2052' (14 shots).
 Acdz w/ 1000 gal NE Fe 15% HCl acid. Swab test. RIH w/ 88 jts 2 7/8" J55 tbg. Set @ 2720'. RIH w/ pump
 & rods. Hang well on pump. RDMO.

Spud Date:

Rig Release Date:

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

SIGNATURE Diana J. Briggs TITLE Production Manager DATE 8/31/10Type or print name Diana J. Briggs E-mail address: dbriggs@marbob.com PHONE: (575) 748-3303**For State Use Only**APPROVED BY: David Gray TITLE Field Supervisor DATE 9-24-10

Conditions of Approval (if any):

GH