

Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

Handwritten initials and date: 1/97

DISTRICT I P.O. Box 1980, Hobbs, NM 88240
DISTRICT II P.O. Drawer DD, 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. 30-015-63141
5. Indicate Type of Lease STATE [X] FEE [ ]
6. State Oil & Gas Lease No. K-2114
7. Lease Name or Unit Agreement Name THE DUKE STATE
8. Well No. 1
9. Pool name or Wildcat CHISUM; DEVONIAN; N.E.

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 [X] GAS WELL [ ] OTHER [ ]
2. Name of Operator MARBOB ENERGY CORPORATION
3. Address of Operator P. O. BOX 227, ARTESIA, NM 88210
4. Well Location Unit Letter 3 : 2603 Feet From The NORTH Line and 1088 Feet From The WEST Line

Section 16 Township 11S Range 28E NMPM EDDY County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3674' GR

11. 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 [ ]
OTHER: [ ]
SUBSEQUENT REPORT OF:
REMEDIAL WORK [ ] ALTERING CASING [ ]
COMMENCE DRILLING OPNS. [ ] PLUG AND ABANDONMENT [ ]
CASING TEST AND CEMENT JOB [ ]
OTHER: TD, CMT CSG [X]

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.
TD WELL ON 7/28/97. DRILD7 7/8" HOLE TO 7400', RAN 170 JTS 5 1/2" J-55 17# CSG TO 7393, CMTD W/200 SX SUPER PREM, AND 550 SX HALL LITE, PLUG DOWN @ 8:15 P.M., TOC 5050'. WOC 18 HRS, TSTD CSG TO 1500# FOR 30 MINUTES - HELD OK.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE Robin Smith TITLE Production Clerk DATE 7-29-97
TYPE OR PRINT NAME TELEPHONE NO. 748-3303

(This space for State Use)
APPROVED BY ORIGINAL SIGNED BY TIM W. GUM DISTRICT II SUPERVISOR TITLE DATE AUG 5 1997
CONDITIONS OF APPROVAL, IF ANY: