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## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office DISTRICT I OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. 2040 Pacheco St. 30-015-31009 Santa Fe. NM 87505 DISTRICT II 5Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 STATE X FEE DISTRICT III State Oil & Gas Lease No 1000 Rio Brazos Rd., Aztec, NM 87410 B-7596 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) **BR-549 STATE** Type of Well: GAS OTHER «Well No. 2Name of Operator V MARBOB ENERGY CORPORATION 2 3Address of Operator Pool name or Wildcat P.O. BOX 227, ARTESIA, NM 88210 EAST EMPIRE YESO ₄Well Location 855 **NORTH** 330 WEST Feet From The Line and Feet From The 27 17S 29E **EDDY** Section Township Range **NMPM** County 10 Elevation (Show whether DF, RKB, RT, GR, etc.) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11 NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ABANDON PERFORM REMEDIAL WORK REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS. **TEMPORARILY ABANDON CHANGE PLANS** PLUG AND ANBANDONMEN PULL OR ALTER CASING CASING TEST AND CEMENT JOB OTHER: TD, CMT CSG OTHER: 12Describe 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 @ 12:00 A.M. 5/10/00. DRLD 7 7/8" HOLE TO 4530', RAN 108 JTS 5 1/2" 17# J-55 CSG TO 4530', CMTD 1ST STAGE W/350 SX SUPER "H", PLUG DOWN @ 5:15 A.M. 5/11/00,, CIRC 80 SX TO SURF, CMTD 2ND STAGE W/675 SX HALL LITE & 200 SX PP, PLUG DOWN @ 12:00 P.M., CIRC 150 SX TO SURF. WOC 18 HRS, TSTD CSG TO 1500# FOR 30 MINUTES - HELD OK. DV TOOL @ 3240'.



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I hereby certify that the information above is true and complete to the best of my kn	owledge and belief.	
SIGNATURE GOODIN COCCUUM	TITLE PRODUCTION ANALYST	DATE 05-12-00
TYPE OR PRINT NAME ROBIN COCKRUM		TELEPHONE NO. 748-3303
(This space for State Use)  Jim W. Bum  APPROVED BY  B 6 A	SUPERVISOR, DISTRICT II	MAY 1 0 2000
APPROVED BY 15 6 X/	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		