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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
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 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

NOV 14 2003
 OGD-ARTESIA
 State of New Mexico
 Energy, Minerals and Natural Resources
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised May 08, 2003

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-015-32900 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> 6. State Oil & Gas Lease No. B-7244 7. Lease Name or Unit Agreement Name TDF STATE 8. Well Number 2 9. OGRID Number 14049 10. Pool name or Wildcat RED LAKE; GLORIETA YESO NE
2. Name of Operator MARBOB ENERGY CORPORATION 3. Address of Operator P O BOX 227, ARTESIA NM 88211-0227 4. Well Location Unit Letter <u>F</u> : 1650 feet from the <u>NORTH</u> line and 2305 feet from the <u>WEST</u> line Section <u>2</u> Township <u>18S</u> Range <u>27E</u> NMPM <u>EDDY</u> County <u>NM</u>		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3571' GR		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: TD CSG/CMT <input checked="" type="checkbox"/>
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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.

TD WELL @3:00 10/15/03, DRLG 7 7/8" HOLE TO 4000', RAN 94 JTS (3966.43') 5 1/2" 17# J-55 CSG TO 3979.98', CMTD 1ST STG W/275 SX SUPER H, PD @1:00 PM, CIRC 83 SX TO PIT, CMTD 2ND STG W/473 SX SUPER H, TAILED IN W/300 SX H/L, PD @8:15 PM, CIRC 41 SX TO PIT, WOC 18 HRS, TSTD CSG TO 1500# FOR 30 MIN.

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

SIGNATURE Debra L. Wilbourn TITLE GEOTECH DATE 11/11/03

Type or print name DEBORA L. WILBOURN Telephone No. (505) 748-3303

(This space for State use)
 APPROVED BY Jim W. Burns TITLE District Supervisor DATE NOV 14 2003
 Conditions of approval, if any: