

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

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 June 19, 2008

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. <input checked="" type="checkbox"/>	30-025-28484
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	<input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. LG1631	
7. Lease Name or Unit Agreement Name Lea UA State <input checked="" type="checkbox"/>	
8. Well Number #1 <input checked="" type="checkbox"/>	
9. OGRID Number 14070 <input checked="" type="checkbox"/>	
10. Pool name or Wildcat Scharb Wolfcamp SE <input checked="" type="checkbox"/>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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
State of New Mexico/ formerly Marks and Garner

3. Address of Operator
1625 N. French Drive Hobbs, NM 88240

4. Well Location
 Unit Letter J: 2080 feet from the South line and 2070 feet from the East line
 Section 16 Township 19S Range 35E NMPM Lea County

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

13-3/8" csg set at 450'—cmt circ.
 8-5/8" csg set at 4200'—cmt circ.
 5-1/2" csg set at 10,963—TOC 6975' by TS
 Perfs 10,711-10729', BOS 3227', TOS 1815'

The Oil Conservation Division **Must be notified 24 hours prior** to the beginning of plugging operations

Verify top of fish at 10,520'. Set CIBP at 10,520' or deeper. Cap w/ 35' by bailer or 25 sxs Class H cmt.
 Circ hole w/9.5 ppg brine mixed w/12.5 lbs of salt gel per bbl.
 Spot 25 sxs Class H cmt at 7711'.
 Perf at 4250' sqz 25 sxs Class C. WOC and TAG. (Shoe plug).
 Perf at 3277' sqz 25 sxs Class C cmt. WOC and TAG. (BOS).
 Perf at 1765' sqz 25 sxs Class C cmt. WOC and TAG. (TOS).
 Perf at 500' sqz 25 sxs Class C cmt. WOC and TAG. (Shoe plug).
 Perf at 60' circ cmt to surface. Cut off wellhead and anchors. Install dry hole marker.

RECEIVED
 MAY 21 2009
 HOBBSOCD

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 Maley S Brown TITLE Compliance Officer DATE 5/20/2009

Type or print name _____ E-mail address: _____ PHONE: _____

For State Use Only
 APPROVED BY: [Signature] TITLE DISTRICT 1 SUPERVISOR DATE MAY 22 2009

Conditions of Approval (if any):

PLUGGING & ABANDONMENT WORKSHEET (3 STRING CSNG)

30-025-28484

OPERATOR MARKS + GARNER
 LEASENAME LEA UA STATE
 SECT J WELL # 1
 FROM 2080 NSL TWN 19 RNG 35
 TD: _____ FORMATION @ TD _____
 PBDT: _____ FORMATION @ PBDT _____

STATE LG1631
 SCHARD WOLFCAMP
 SE
 OGRID 14070

705 @ 1815'
 805 @ 3227'

13 3/8"
@ 450'
 TOC CIRC.
 PKR @ 2255'

8 5/8"
@ 4200'
 TOC CIRC.



	SIZE	SET @	TOC	TOC DETERMINED BY	
SURFACE	13 3/8	450'	CIRC		
INTMED 1	8 5/8	4200'	CIRC		
INTMED 2					
PROD	5 1/2	10963	6975'	TS.	
	SIZE	TOP	BOT	TOC	DETERMINED BY
LINER 1					
LINER 2					
CUT & PULL @			TOP - BOTTOM		
INTMED 1			PERFS		-
INTMED 2			OPENHOLE		-
PROD					

* REQUIRED PLUGS DISTRICT I

RUSTLER (ANHYD)
YATES
QUEEN
GRAYBURG
SAN ANDRES
CAPTAN REEF
DELAWARE
BELL CANYON
CHERRY CANYON
BELSHY CANYON
BONE SPILING
GLORIETA
BLINEBY
TUBS
DEINCARD
ABO
WC
PENK
STRAWN
ATOKA
LABROW
MISS
DEVORIAN

PLUG	TYPE PLUG	SACKS CMNT	DEPTH
EXAMPLES			
PLUG #1	OH	25 SXS	9850'
PLUG #2	SHOE	50 SXS	8700'-8800'
PLUG #3	CIBP/35'		5300'
PLUG #4	CIBP	25 SXS	5300'
PLUG #4	STUB	50 SXS	4600'-4700'
PLUG #6	RETNR SOZ	200 SXS	400'
PLUG #7	SURF	10 SXS	0-10'
PLUG #1			
PLUG #2			
PLUG #3			
PLUG #4			
PLUG #5			
PLUG #6			
PLUG #7			
PLUG #8			
PLUG #9			
PLUG #10			
PLUG #			
PLUG #			

TP @ 10,711'
 Fesh @ 10,520'
5 1/2"
@ 10963'
 TOC 6975'
 TS

TD _____

Submit 3 Copies To Appropriate District Office

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1991

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.	30-025-28484
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	LG 1631
7. Lease Name or Unit Agreement Name:	Lea UA State
8. Well No.	1
9. Pool name or Wildcat	Scharb Wölfcamp SE

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
Marks and Garner Production LTD CO.

3. Address of Operator
POB 70 Lovington NM 88260

4. Well Location
Unit Letter J : 2080 feet from the S line and 2070 feet from the E line
Section 16 Township 19S Range 35E NMPM Lea County

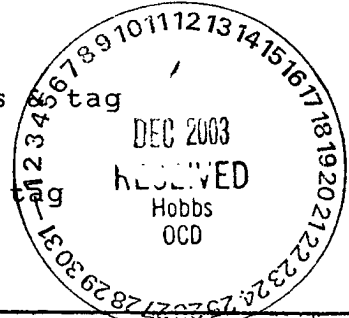
10. Elevation (Show whether DR, RKB, RT, GR, etc.)

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

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input checked="" type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>
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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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

1. Set CIBP 50' above perfs @ 10,911 & cap w/ 35' cement wait 24 hrs & tag
2. Load hole w/ mud
3. Set 100' plug @ 8326'--wait 24 hrs & tag
4. Shoot 5 1/2" casing @ 5826' & pull casing
5. Set 100' plug-in & out- @ 5826'- wait 24 hrs & tag
6. Set 100' plug @ 3326'--wait 24 hrs & tag
7. Set 100' plug TOS-1800'- wait 24 hrs & tag
8. Set 100' plug @ surface-450'- wait 24 hrs & tag
9. Set dry hole marker w/ 10 sack surface plug



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

SIGNATURE Link EL Marks TITLE Member-Partner DATE 12-11-2003

Type or print name Link EL Marks Telephone No 505 396 5326

(This space for State use) DEC 23 2003

APPROVED BY Gay W. Wink FIELD REPRESENTATIVE II/STAFF MANAGER DATE _____

Conditions of approval, if any

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.