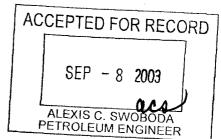
Form 3160-5 (August 1999)

Oil Cons.

Form 3160-5 (August 1999)	UNITED STATE DEPARTMENT OF THE BUREAU OF LAND MANA	INTERIOR	01 W. Gr	v-Dist. 2 and Aver IM 8821	due	OM Expire	ORM APPROVED 1B No. 1004-0135 is November 30, 2000	
Do not use	ORY NOTICES AND REPO this form for proposals to well. Use Form 3160-3 (AP	drill or to	re-enter an		NMLC028	8784		
SUBMIT IN 1	TRIPLICATE - Other instr	uctions on		P			/Agreement, Name and/or No.	,.
1. Type of Well Oil Well Gas Well 2. Name of Operator	Other		23050780	101772	8. Well N	Name a	·	_
MARBOB ENERGY C		1 1	SEP No. (include Green	2003 (5) (FEGS) 17	9. API W	/ell No -327).	_
4. Location of Well (Footage, S	RTESIA, NM 88211-02 Sec., T., R., M., or Survey Description L., SEC. 18-T17S-R301	n) \c	748-3303R	ESIA 37	_	ACKS y or Pa	GON SR Q GRBG SA crish, State	•
12. CHECK	APPROPRIATE BOX(ES) To	O INDICATI	E NATURE O	F NOTICE, R	EPORT, O	R OT	THER DATA	
TYPE OF SUBMISSION			TYPE O	F ACTION				
Notice of Intent Subsequent Report Final Abandonment Notice	Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Fracture 7 New Cons Plug and A Plug Back	struction	Production (Star Reclamation Recomplete Temporarily Ab Water Disposal	,		Water Shut-Off Well Integrity Other SPUD CMT/CSO	<u>G</u>
If the proposal is to deepen d Attach the Bond under which following completion of the testing has been completed. determined that the site is read SPUD WELL @1:30 I	PM ON 9/2/03, DRLD 1	lly, give subsurfivide the Bond? in results in a muse filed only after the bond?	ace locations and No. on file with E litiple completion at all requirements of the completion of the c	I measured and the BLM/BIA. Required to recompletion test, including rectification in the rec	ue vertical depited subsequer in a new interaction, have	pths of nt repo rval, a been	f all periinent markers and zon or shall be filed within 30 did Form 3160-4 shall be filed or completed, and the operator if	ne lay
HRS, TSTD CSG TO	, CMTD W/300 SX P+, 600# FOR 20 MIN - H	ELD OK.	rm UN 9/0	02/03, CIR	C 83 SX	TO :	PIT, WOC 18	



14. I hereby certify that the foregoing is true and correct Name (Printed[Typed])	1				
DEBORA L. WILBOURN	Title GEOTECH				
Signature Debora L. Elelbourn	Date 9/03/03				
THIS SPACE FOR FEDER	AL OR STATE OFFIC	TE OFFICE USE			
Approved by	Title	Date			
Conditions of approval, if any, are attached. Approval of this notice does not wa certify that the applicant holds legal or equitable title to those rights in the subjewhich would entitle the applicant to conduct operations thereon.	rrant or ct lease Office	Office			
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for States any false, fictitious or fraudulent statements or representations as to any matter	any person knowingly and	willfully to make to any department or agency of the Un			