

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  
May 27, 2004

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

WELL API NO. 30-015-35221
7. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
7. State Oil & Gas Lease No.

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 )		7. Lease Name or Unit Agreement Name Heyco State
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Number 1
2. Name of Operator Marbob Energy Corporation	AUG 03 2007	9. OGRID Number 14049
3. Address of Operator PO Box 227, Artesia, NM 88211-0227	OCD-ARTESIA	10. Pool name or Wildcat Santo Nine; Bone Spring
4. Well Location Unit Letter O : 660 feet from the South line and 1980 feet from the East line Section 32 Township 18S Range 30E NMPM Eddy County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3379' GL		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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 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"/>	
OTHER: <input type="checkbox"/>		OTHER: Recompletion <input checked="" 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.

Recompleted in the Bone Spring Sand 1 zone as follows:

7/12/07 - Set CIBP @ 8800'. Perf the Bone Spring Sand 1 @ 8144' - 8162' (38 shots).  
7/13/07 - Acdz perfs w/ 1000 gal NE Fe 7 1/2% HCl acid.  
7/17/07 - Frac w/ 1006 sx sand & 63780 gal fluid. AIR 30.35 BPM. AIP 1986#. ISIP 4394#.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Diana J. Briggs TITLE Production Analyst DATE 7/31/07

Type or print name Diana J. Briggs E-mail address: production@marbob.com Telephone No. (505) 748-3303

**For State Use Only** **FOR RECORDS ONLY**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE AUG 04 2007  
Conditions of Approval (if any): \_\_\_\_\_