

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

OCT 01 2007

Form C-103  
 May 27, 2004



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

OCD-ARTESIA

WELL API NO. 30-015-35536
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name SPANISH CEDAR STATE COM
8. Well Number 1
9. OGRID Number 14049
10. Pool name or Wildcat BLACK RIVER; MORROW (GAS)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3143' GR
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 _____

**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 CORRECTED

2. Name of Operator  
MARBOB ENERGY CORPORATION

3. Address of Operator  
P O BOX 227  
ARTESIA, NM 88211-0227

4. Well Location  
 Unit Letter 0 : 720 feet from the SOUTH line and 1970 feet from the EAST line  
 Section 3 Township 24S Range 27E NMPM EDDY County NM

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

<b>NOTICE OF INTENTION TO:</b> 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 COMPL <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <u>CORRECTED</u> <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.

08/24/07 @6:45 AM, DRLD 12 1/4" HOLE TO 2092'. RAN 49 JTS (2094') 9 5/8" 36# J-55 STC CSG TO 2092'. CMTD W/400 SX H/L, TAILED IN W/250 SX P+, PD @8:00 PM 08/08/24/07. CIRC 113 SX TO PIT. WOC 18 HRS, TSTD CSG TO 1500# F/30 MIN - HELD OK.

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 NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE Deborah L. Wilbourn TITLE GEOTECH DATE 09/28/07

Type or print name DEBORA L. WILBOURN E-mail address: geology@marbob.com Telephone No 505-748-3303  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ **FOR RECORDS ONLY** TITLE \_\_\_\_\_ DATE OCT 10 2007  
 Conditions of Approval (if any): \_\_\_\_\_