Prom. 3160=5 Pr(August, 2007) VED FEB - 5 2010	BUREAU OF LAND MANAGEMENT			0	FORM APPROVED DMB No 1004- 0137 Expires July 31, 2010 No	
NMOCD ARTESIA bo not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				6 If Indian, Allottee, or Tribe Name		
SUBMIT IN TRIPLICATE - Other Instructions on page 2.					Agreement Name and/or No.	
Type of Well On Well Gas Well Gas Well					8 Well Name and No	
2 Name of Operator						
3a Address P.O. Box 227				<u>9. API.Well.No.</u> 30-015-37136		
Artesia, NM 88211-022	Artesia, NM 88211-0227 575-		18-3303	4	ol, or Exploratory Area	
. –	4. Location of Well (Footage, Sec., T, R., M., or Survey Description)			Cedar Lake; Glorieta-Yeso		
1720' FNL & 2310' FWL Sec 17-T17S-R31E	1720' FNL & 2310' FWL, Unit F (SENW)		Long.		,	
Sec 17-T17S-R31E Eddy NM 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA						
TYPE OF SUBMISSION						
X Notice of Intent	Acidıze	Deepen	Production (S	start/ Resume)	Water Shut-off	
	Altering Casing	Fracture Treat	Reclamation		Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recomplete		X Other	
	Change Plans	Plug and abandon	Temporarily A	Abandon	Name Change	
Final Abandonment Notice	Convert to Injection	Plug back	Water Disposal			
Attach the Bond under which the following completion of the invol testing has been completed Fina determined that the site is ready for	ctionally or recomplete horizontall work will performed or provide to ved operations If the operation re I Abandonment Notice shall be fi final inspection)	y, give subsurface locatio he Bond No. on file with sults in a multiple comple led only after all require	ns and measured and the BLM/ BIA. Req etton or recompletion ments, including recla	true vertical dept uired subsequent r in a new interval, mantion, have bee	ths or pertinent markers and sands. eports shall be filed within 30 days a Form 3160-4 shall be filed once en completed, and the operator has	
Marbob Energy Corpo	oration respectfully req	uests approval fo	r the following	g name chan	ge:	

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From: Foster Eddy Federal #14 To: Foster Eddy #14

Effective Date: 4/1/09

SUBJECT TO LIKE APPROVAL BY STATE



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14 1 hereby certify that the foregoing is true and correct. Name (Printed/Typed)						
Stormi Davis	Title Production Assistant					
Signature Storm Drives	Date 1/20/10					
THIS SPACE FOR FEDERAL OR STATE OFFICE USE						
Approved by	Title	Date				
Conditions of approval, if any are attached Approval of this notice does not warrant certify that the applicant holds legal or equitable title to those rights in the subject leg which would entitle the applicant to conduct operations there	or ase Office	Isan				
Title 18 USC Section 1001 AND Title 43 USC Section 1212, make it a crime States any false, fictitiousor fraudulent statements or representations as to any matter wi		angly and willfully to make any department or agency of the United				
(Instructions on page 2)		D. L.				