

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-2179

7. Lease Name or Unit Agreement Name

Keyes State

8. Well No.

3

9. Pool name or Wildcat

Red Lake Qn Grbg SA

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

RECEIVED

2. Name of Operator

Marbob Energy Corporation ✓

SEP 24 1991

3. Address of Operator

P. O. Drawer 217, Artesia, NM 82810

O. C. D.  
ARTESIA OFFICE

4. Well Location

Unit Letter G : 1650 Feet From The North Line and 1650 Feet From The East Line

Section 9

Township 17S

Range 28E

NMPM

Eddy

County

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

5521'

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☒

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

We propose to plug and abandon as follows: Set cmt plug from  
PBSD to 1600'. Tag plug @ 1730'. Set cmt plug @ 1500-1300'.  
Set cmt plug @ 1200-1000'. Perf csg @ 700' and squeeze perfs  
w/75 sx cmt and set 25 sx surface plug. Install dry hole  
marker and clean location.

\* Perforated line @ 300'  
\* gel between plugs

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

SIGNATURE

Robin Smith

TITLE Production Clerk

DATE 9/20/91

TYPE OR PRINT NAME

Robin Smith

TELEPHONE NO. 748-3303

(This space for State Use)

APPROVED BY

George Johnson

TITLE

DATE 10-1-91

CONDITIONS OF APPROVAL, IF ANY:

Plugging