Submit 3 Copies
to Appropriate
District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

MAR 3 1 1993

O. C. D.

Form C-103
Revised 1-1-89

WELL API NO.	
5. Indicate Type of Lease	STATE XX FEE ☐
6. 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.)

1. Type of Well:
   OIL WELL XX   GAS WELL ☐   OTHER

2. Name of Operator
   Marbob Energy Corp

3. Address of Operator

4. Well Location

   Unit Letter F : 1650 Feet From The FNL Line and 1650 Feet From The FWL Line

   Section 25   Township 17-S   Range 28-E   NMPM   Eddy   County

7. Lease Name or Unit Agreement Name

   FWY STATE

8. Well No.   2

9. Pool name or Wildcat

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

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT XX
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: _____ ☐		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.

(1) Spot 30 sacks cement at 834' W.O.C. Tag cement at 541'.
(2) Perforate 5½ casing at 350'.
(3) Bull head squeeze 100 sacks cement did not circulate W.O.C.
    Tag cement at 171'
(4) Spot 125 sacks cement in 5½ casing and outside of 5½ casing to surface and set P&A marker up.

Post ID-2
4-2-93
P&A

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

SIGNATURE _Rapmon Maldurad_   TITLE _Supervisor_   DATE 3-24-93

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY _____

CONDITIONS OF APPROVAL, IF ANY:

TITLE   OIL AND GAS INSPECTOR   DATE 6/15/93