

Submit 3 Copies To Appropriate District
Office
District I
525 N. French Dr., Hobbs, NM 88240
District II
11 South First, Artesia, NM 87210
District III
960 Rio Brazos Rd., Aztec, NM 87410
District IV
220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

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

Form C-103
Revised March 25, 1999

clsf
gp

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.)		WELL API NO. 30-015-02784
Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
Name of Operator Marks and Garner Production, Ltd. Co.		6. State Oil & Gas Lease No. B11662
Address of Operator POB 70 Lovington, NM 88260		7. Lease Name or Unit Agreement Name: Cave Pool Unit
Well Location Unit Letter O : 660 feet from the South line and 1780 feet from the East line Section 33 Township 16S Range 29E NMPM County Eddy		8. Well No. 1
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3595 GR		9. Pool name or Wildcat Greyburg, Jackson, SA, On

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: 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 COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input checked="" type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>

2. 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 recompilation.

Install new rod pump & return to production

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

SIGNATURE Ernest L. Marks TITLE Member-Partner DATE 11-28-2001

Type or print name Ernest L. Marks Telephone No. 505 396 5326
(This space for State use)

APPROVED BY [Signature] TITLE Field Rep DATE 11-29-01
Conditions of approval, if any: