

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-015-21469
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No. B-2071
Lease Name or Unit Agreement Name Walker State
Well No. 1
Pool name or Wildcat E. EMPIRE YATES SEVEN RIVERS

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.)	
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
Name of Operator MARBOB ENERGY CORPORATION	
Address of Operator PO BOX 227, ARTESIA NM 88211	
Well Location Unit Letter O : 990 Feet From The SOUTH Line and 1650 Feet From The EAST Line Section 27 Township 17S Range 28E NMPM EDDY County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3666 GR	

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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 ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

MARBOB PROPOSES TO PLUG AND ABANDONED BY SQUEEZING CEMENT PLUG FROM 834 - 846. WILL THEN FILL CASING WITH CEMENT TO SURFACE, NO CASING IS TO BE REMOVED. UPON COMPLETION OF DRILLING A NEW WELL ON THIS LOCATION A DRY HOLE MARKER WILL BE INSTALLED

* Cement Plug from 846' to surface.

* Notify M.M.C.D. to witness Plugging Operations.



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

SIGNATURE Dean Chumbley TITLE LAND DEPARTMENT DATE 10-05-99
TYPE OR PRINT NAME DEAN CHUMBLEY TELEPHONE NO. 505/748-3303

(This space for State Use)

APPROVED BY Melissa Williford TITLE Field Rep II DATE OCT. 12 - 1999
CONDITIONS OF APPROVAL, IF ANY: