Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

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 1415167 WELL API NO. 30-015-23217 5Indicate Type of Lease

STATE

State Oil & Gas Lease No

V-176

SUNDRY NOTICES AND REPORTS ON VELLO (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLAN FOR PERSERVOIR. USE "APPLICATION FOR PERMIT"

(FORM C-101) FOR SUCH PROPOSALS.

Lease Name or Unit Agreement Name

NEW MEXICO CY STATE

RED LAKE QUEEN-GRBG

₂Name of Operator MARBOB ENERGY CORPORATION

3Address of Operator

P.O. BOX 227, ARTESIA, NM 88210

4Well Location Unit Letter

1980

WELL

Feet From The

SOUTH

Line and

18293037

1650

Feet From The

Pool name or Wildcat

EAST

Line

FFF

Section

Type of Well:

WELL

23

Township

Range

28E

NMPM

«Well No.

EDDY

County

17S 10 Elevation (Show whether DF, RKB, RT, GR, etc.)

WDW

OTHER

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 ANBANDONMENT

PULL OR ALTER CASING

work) SEE RULE 1103.

OTHER:

11

CASING TEST AND CEMENT JOB OTHER: BEGIN DISPOSAL

12Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed

PERFS FROM 8593-8850

9/22/99 TIH, DO CIBP, RUN CSG SCRAPER, TIH TO 8545' W/ PERMA LATCH PC PKR, 2 7/8" IPC TBG, PUMP 80 BBLS PKR FLUID, FINISH LOADING BACK SIDE W/PKR FLUID

9/23/99 NOTIFIED BETTY ROLLINS OCD-ARTESIA THAT WE PLAN TO TEST CSG LATE 9/24/99 OR EARLY 9/25/99

9/25/99 PRESSURE TESTED CSG TO 300# FOR 30 MINUTES - HELD OK (NMOCD DID NOT WITNESS) - CHART ATTACHED

SEE ADMINISTRATIVE ORDER # SWD-740

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

SIGNATURE

TITLE PRODUCTION ANALYST

DATE 04-17-00

TYPE OR PRINT NAME ROBIN COCKRUM

TELEPHONE NO. 748-3303

(This space for State Use)

APPROVED BY M3

TITLE Field Rep. II DATE 4/18/2000.

CONDITIONS OF APPROVAL, IF ANY

