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 OIL CONSERVATION DIVISION 2040 Pacheco St.

Santa Fe, NM 87505

•	
WELL API NO.	
30-015-31940	
sIndicate Type of Lease	

		O.	alitai C, INIVI	07 303				
DISTRICT II P.O. Drawer DD, Artesia, NM 88210				sIndicate Type of Lease STATE FEE				
DISTRICT III 1000 Rio Brazos Rd., Azteo	c, NM 87410				_	₅State Oil & Gas Leas E-647		
	JNDRY NOTICES				CK TO A		·	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"				7Lease Name or Unit a	Agreement Name			
	(FORM C-101) I	OR SUCH P	ROPOSALS.)			"D" STATE		
Type of Well: OIL WELL	GAS WELL .		OTHER					
₂Name of Operator MARBOB ENERGY	CORPORATION					₃Well No. 29		
3Address of Operator PO BOX 227, ARTE	ESIA, NM 88210					∍Pool name or Wildcat ARTESIA GLOR		
4Well Location			COUTU		000		FACT	
Unit Letter P	510 Feet F	rom The	SOUTH	Line and	990	Feet From The	EAST	Line
Section	25	ownship	17S	Range	28E	NMPM	EDDY	County
		_ν Elevatio	n (Show whether I	DE RKB RT GR. e	etc.)	1		

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

3672' GR

REMEDIAL WORK

ALTERING CASING

TEMPORARILY ABANDON

CHANGE PLANS

COMMENCE DRILLING OPNS.

PLUG AND ANBANDONMENT

CASING TEST AND CEMENT JOB

PULL OR ALTER CASING

OTHER:

OTHER: TD, CMT CSG

12Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

TD WELL @ 6:30 PM ON 10/8/01, DRLD 7 7/8" HOLE TO 4550', RAN 107 JTS (4558') 5 1/2" 17# J55 CSG TO 4548', CMTD W/ 1050 SX P+ ZONE SEAL, TAIL IN W/ 50 SX P+, CAP W/ 50 SX P+ 2% CACL, PLUG DOWN @ 7:45 PM ON 10/9/01, CIRC 148 SX TO PIT. WOC 18 HRS, TSTD CSG TO 1500# FOR 30 MIN - HELD OK.

I hereby certify that the information above is true and complete to the best of my knowledge and being 9292 72

TITLE PRODUCTION ANALYST

DATE 10-10-01

TYPE OR PRINT NAME DIANA J. CANNON

TELEPHONE NO. 505-748-3303

(This space for State Use)

APPROVED BY

ORIGINAL SIGNED BY DISTRICT II SUPERVISOR

DATE

CONDITIONS OF APPROVAL, IF ANY: