

Submit 3 Copies To Appropriate District Office

District I

1625 N. French Dr., Hobbs, NM 87249

District II

811 South First, Artesia, NM 87210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico

Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

2040 South Pacheco

Santa Fe, NM 87505

Form C-103

Revised March 25, 1999

WELL API NO.

30-015-32484

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

E-647

7. Lease Name or Unit Agreement Name:

D STATE

8. Well No.

32

9. Pool name or Wildcat

ARTESIA; GLORIETA-YESO

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 ☒ Gas Well ☐ Other ☐

2. Name of Operator

MARBOB ENERGY CORPORATION /

3. Address of Operator

PO BOX 227, ARTESIA, NM 88211-0227

4. Well Location

Unit Letter M : 430 feet from the SOUTH line and 330 feet from the WEST line

Section 26 Township 17S Range 28E NMPM County EDDY

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

3680' GL

11. 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 ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: SPUD, CMT CSG ☒

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

SPUD WELL @ 4:30 PM ON 1/28/03, DRLD 12 1/4" HOLE TO 505', RAN 11 JTS (483.74') 8 5/8" 24# J55 CSG TO 499', CMTD W/ 350 SX P+, PLUG DOWN @ 4:00 AM ON 1/29/03, CIRC 92 SX TO PIT. WOC 18 HRS, TESTED CSG TO 600# FOR 20 MIN - HELD OK.

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

SIGNATURE [Signature] TITLE PRODUCTION ANALYST DATE 1/29/03

Type or print name DIANA J. CANNON

Telephone No. (505) 748-3303

(This space for State use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT IV SUPERVISOR

APPROVED BY [Signature] TITLE

DATE FEB - 5 2003

Conditions of approval, if any: