ENERGY AND MINERALS DEPARTMENT		
MO. OF COPIES ACCEIVES	OIL CONSERVATION DIVISION	N
DISTRIBUTION SANTA FE	RECEIVED BY O. BOX 2088	Form C-103
SANTA PE	SANTA FE, NEW MEXICO 87501	Revised 10-1-7
U.S.O.S.	DEC 18 1984	5a. Indicate Type of Lease
LAND OFFICE	320 100 1	State y Fee
OPERATOR /	O. C. D.	5, State Oil & Gas Lease No.
	ARTESIA, OFFICE	p 1266
SUNDRY N	OTICES AND REPORTS ON WELLS LS TO DRILL ON TO DEEPEN OR PLUG BACK TO A DIFFERENT RESE OR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	Million Maria
USE "APPLICATION F	LS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESE OR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	AVOIR.
6A9		7, Unit Agreement Name
2. Name of Operator	DTHER-	
Marbob Energy Corporation		8. Farm or Lease Name
3. Address of Operator	C1011 -	G-J West Coop Unit
P.O. Drawer 217, Artesia, N.M. 88210		9. Well No.
4. Location of Well		26
M 330	FEET FROM THE SOUTH LINE AND 990	10. Field and Pool, or Wildcat
DRIT LETTER	FEET FROM THE BOULD LINE AND 990	FEET FROM Grbg Jackson SR Q G SA
THE West	22 TOWNSHIP 17S RANGE 29E	
THE LINE, SECTION	TOWNSHIP 175 RANGE 29E	BMPM. (
	15. Elevation (Show whether DF, RT, GR, etc.)	
	3528' GR	12. County
16. Charle Anna		Eddy
NOTICE OF INTER	opriate Box To Indicate Nature of Notice, Re	eport or Other Data
NOTICE OF INTER	st	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK		
TEMPORARILY ASANDON	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
PULL OR ALTER CASING	COMMENCE DRILLING OPN	THE THE PART AND ABANDONERY
	CHANGE PLANS CASING TEST AND CEMENT	
OTHER	OTHER <u>Retur</u>	n to production X
17. Describe Proposed or Completed Operatio	ns (Clearly state all pertinent details, and give pertinent da	tes, including estimated date of stories and a
aying the Note 1100.		the state of statement any proposed
Well was shut in. Cha 5 bbl oil in 24 hour p	anged pump and returned well to produ period.	ction. Made
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18. I hereby coffly that the information shade i	s true and complete to the best of my knowledge and belief.	
	and belief.	
(Carol (I)	- 10 nmade 11 m	
GENED WARDEN JUL	Cella Production Clerk	DATE 12/17/84
	Original Signed By	
	Leslie A. Clements	IAN 9 0 400 4
APPROVED BY	TITLE Supervicer District	JAN 3 0 1984

CONDITIONS OF APPROVAL, IF ANY:

And the state of