

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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OPERATION	<input checked="" type="checkbox"/>

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5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-514	
7. Unit Agreement Name	
G-J West Coop Unit	
8. Farm or Lease Name	
G-J West Coop Unit	
9. Well No.	
11	
10. Field and Pool, or Whitcat	
Grbg Jackson SR Q Grbg SA	
12. County	
Eddy	

MAR 30 '88

SUNDY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT PROPERTY. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☐ GAS WELL ☐ OTHER- NIW O.C.D.

2. Name of Operator Marbob Energy Corporation ARTESIA, OFFICE

3. Address of Operator P.O. Drawer 217, Artesia, N.M. 88210

4. Location of Well

UNIT LETTER E 1980 FEET FROM THE North LINE AND 330 FEET FROM THE West LINE, SECTION 28 TOWNSHIP 17S RANGE 29E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.) 3586' KB

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <u>Return to injection</u> <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. 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.

We propose to pull retrievable bridge plug @ 2450', POH. RIH w/4 1/2" tension pkr, set @ 2450', circ pkr fluid around annulus, tst csg to 500#, put back on injection.

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

SIGNED Rhonda Nelson TITLE Production Clerk DATE 3/29/88

Original Signed By
Mike Williams

APPROVED BY Oil & Gas Inspector TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

MAR 30 1988