Submit 3 Copies to Appropriate District Office

DISTRICT II

State of New Mexico Energy, M .als and Natural Resources Department

Form	C	-10	3
Revis	eđ	1-1	-8

Form :	C-1	03
Revise	d 1.	1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 8
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P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION
P.O. Box 2088 RECEIVED P.O. Box 2088

Santa Fe, New Mexico 87504

30-015-26769 5. Indicate Type of Lease m X

Intermediate csg & cmt

WELL API NO.

		SIAIE ED FEE CO		
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 O. C. D. ARTESIA, OFFICE		6. State Oil & Gas Lease No. B-1266		
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.)		7. Lease Name or Unit Agreement Name		
1. Type of Well: OIL. WELL X WELL OTHER		G-J West Coop Unit		
2. Name of Operator Marbob Energy Corporation		8. Well No. 99		
3. Address of Operator		9. Pool name or Wildcat		
P. O. Drawer 217, Artesia, NM 82810		Grbg Jackson SR Q Grbg SA		
4. Well Location				
Unit Letter O: 1420 Feet From The East	Line and760	Feet From The South Line		
		NMPM Eddy County		
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3563.6' GR				
Clared Appropriate Pow to Indicate Nature of Notice Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
ERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING				
TEMPORARILY ABANDON CHANGE PLANS	CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT			
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB			

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.

> 7/9/91 WOC, drld cmt & plug 13 3/8", drld 12 1/4" hole to 765' RIH w/757 of 8 5/8" OD 24# J-55 EW csg, cmtd w/350 sx Class C w/2% CC, circ 50 sx to pit, plug down @ 7:15 p.m. 7/9/91. WOC 18 hrs, tstd csg to 600# f/20 minutes--held okay.

OTHER:_

I hereby certify that the inform	nation above is true and complete to the best of my know	ledge and belief.	
SIGNATURE PODI	indmilk	mme Production Clerk	DATE7/12/91
	Robin Smith		TELEPHONE NO.7 48 - 3 3 0 3
TYPE OR PRINT NAME	ROBIN SMICH		
(This space for State Use)	ORIGINAL SIGNED BY		1 0 4001
	MIKE WILLIAMS		JUL 1 8 1991
APPROVED BY	SUPERVISOR, DISTRICT !	TITLE	

PULL OR ALTER CASING