

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87501

OCT 15 1991

WELL API NO.

30-015-26781

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-10714

7. Lease Name or Unit Agreement Name

G-J West Coop Unit

8. Well No.

98

9. Pool name or Wildcat

Grbg Jackson SR Q Grbg SA

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

P. O. Drawer 217, Artesia, NM 82810

4. Well Location

Unit Letter E : 1845 Feet From The North Line and 687 Feet From The West Line

Section 22 Township 17S Range 29E NMPM Eddy County

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

3546.8' GR

11.

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 ☐

REMEDIAL WORK ☐

ALTERING CASING ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

OTHER: Intermediate 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.

Drld 12 1/4" hole to 820', ran 19 jts. 8 5/8" OD 24#
csg to 803', cmt'd w/450 sx Class C w/2% CC, circ 87
sx, plug down @ 1:15 a.m. 10/2/91. WOC 18 hrs., tst'd
csg to 600# f/20 minutes--held okay.

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

SIGNATURE

TITLE Production Clerk

DATE 10/3/91

TYPE OR PRINT NAME

TELEPHONE NO. 748-3303

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS

OCT 29 1991

SUPERVISOR DISTRICT II

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: