

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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cls
Op

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 87504-2088

OCT 30 1991

O.C.D.

WELL API NO.

30-015-26839

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-9563

7. Lease Name or Unit Agreement Name

G-J West Coop Unit.

8. Well No.

102

9. Pool name or Wildcat

Grbq Jackson SR Q Grbq 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 M : 25 Feet From The South Line and 1295 Feet From The West Line

Section

21

Township

17S

Range

29E

NMPM

Eddy

County

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

3600.1' GR

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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: TD, 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.

TD 4450' 10/26/91. Ran 102 jts. 5 1/2" OD 17# csg to 4421',
cmt'd w/1050 sx Class C w/6# salt per sx & 3/10 of 1% Halad
322, circ 135 sx, plug down @ 1:00 a.m. 10/27/91. WOC 18 hrs.,
tstd csg to 1800# f/30 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 10/29/91

TYPE OR PRINT NAME

TELEPHONE NO. 748-3303

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY

TITLE

DATE

NOV - 5 1991

CONDITIONS OF APPROVAL, IF ANY:

THE UNIVERSITY OF CHICAGO
LIBRARY
540 EAST 57TH STREET
CHICAGO, ILL. 60637