Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Ainerals and Natural Resources Department

Form C	-103
Revised	1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Box 20 RECEIVED

WELL API NO. 30-015-26840

DISTRICT II Santa Fe, New Mexico P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease STATE X FEE			
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	O. C. D. 6. State Oil & Gas Lease No. 8-1266			
SUNDRY NOTICES AND REPORTS ON WELL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN DIFFERENT RESERVOIR. USE "APPLICATION FOR PER (FORM C-101) FOR SUCH PROPOSALS.)	LS OR PLUG BACK TO A 7 Lease Name of Unit Agreement Name			
1. Type of Well: OIL OAS WELL X OTHER	G-J West Coop Unit			
2. Name of Operator Marbob Energy Corporation √	8. Well No. 100			
3. Address of Operator P. O. Drawer 217, Artesia, NM 82810	9. Pool name or Wildcat Grbg Jackson SR Q Grbg SA			
4. Well Location Unit Letter K: 1345 Feet From The South Line and 1345 Feet From The West Line Section 21 Township 17S Range 29E NMPM Eddy County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3608.1' GR				
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 CHANGE PLANS DULL OR ALTER CASING	REMEDIAL WORK COMMENCE DRILLING OPNS. CASING TEST AND CEMENT JOB OTHER: Intermediate csg X			
 Describe Proposed or Completed Operations (Clearly state all pertinent details, an work) SEE RULE 1103. 	d give pertinent dates, including estimated date of starting any proposed			

Drld 12 1/4" to 776', ran 8 jts. 8 5/8" OD 24# ST&C csg to 759', cmtd w/250 sx Class C w/2% CC, circ 75 sx to surf, plug down @ 7:30 p.m. 10/12/91. WOC 18 hus., tstal esq to 600 + 1/20 cminulis - head K.

	A		
I hereby certify that the inform	action above is true and complete to the best of my knowle	odge and belief	DATE 10/18/91
TYPE OR PRINT NAME			TELEPHONE NO.748-3303
(This space for State Use)	ORIGINAL SIGNED BY		OCT 2 4 1991

CONDITIONS OF APPROVAL, IF ANY:

SUPERVISOR, DISTRICT IT