mit 3 Copies
Appropriate
strict Office

State of New Mexico
Energy, erals 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 87504-2088

WELL API NO.
30-015-28714

5. Indicate Type of Lease
FEDERAL STATE FEE

6. State Oil & Gas Lease No.
LC-029435B

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
ARCO "6" FEDERAL

1. Type of Well:
OIL WELL ☐ GAS WELL ☐ OTHER SWD

2. Name of Operator
MARBOB ENERGY CORPORATION

8. Well No.
1

3. Address of Operator
P. O. BOX 227, ARTESIA, NM 88210

9. Pool name or Wildcat
~~WILDCAT~~ SWD Canyon 96184

4. Well Location
Unit Letter K : 1800 Feet From The SOUTH Line and 1410 Feet From The WEST Line

Section 6 Township 17S Range 31E NMPM EDDY County

10. Elevation *(Show whether DF, RKB, RT, GR, etc.)*
3735' 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: CONVERT TO SWD XX	

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.

PERF 9296-9464', ACD W/5000 GALS 15% NEFE & ESTB RATE W/HALLIBURTON,
TIH & SET CIBP @ 10485' W/40' CMT ON TOP, TIH W/PKR, SET PKR @ 9250',
LOAD & TEST ANNULAS TO 500# - TEST OK.

Post FD-3
1-22-99
C-MI
to SWD

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

SIGNATURE Robin Cochrum TITLE Production Clerk DATE 12/8/98

TYPE OR PRINT NAME TELEPHONE NO. 748-3303

(This space for State Use)

APPROVED BY Mike Stubblefield TITLE Field Rep. II DATE 1-8-99

CONDITIONS OF APPROVAL, IF ANY: