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C.I.L CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-103
Revised 10-1-78RECEIVED
APR 21 1980

O. C. D.

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name Shirley	
9. Well No. 1	
10. Field and Pool, or Wildcat Undesignated Grayburg	
12. County Eddy	

SUNDRY NOTICES AND REPORTS ON WELLS, ARTESIA, OFFICE
(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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator
Marbob Energy Corp. ✓

Address of Operator
P.O. Box 304, Artesia, N.M. 88210

Location of Well
UNIT LETTER N 660 FEET FROM THE South LINE AND 1980 FEET FROM
THE West LINE, SECTION 35 TOWNSHIP 18S RANGE 26E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3300.1 GR

6. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

7. 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.

ID 1170

Plugged and abandoned well as follows: Swabbed well dry, pulled tubing, filled hole w/5 yds. 5 sack ready mix concrete. Set dry hole marker 1/29/80.

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

SIGNED Carolyn Chris TITLE Secretary DATE 4/18/80

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: