Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

CISE	Form C-103 Revised 1-1-89
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DISTRICT I

Section

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

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## OIL CONSERVATION DIVISION

Township

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

ISTRICT I	OIL CONSERVATION DIVISION				<u> </u>		
O. Box 1980. Hobbs, NM 88240	2040 Pacheco St. Santa Fe, NM 87505			WELL API NO. 30-015-30966			
ISTRICT II O. Drawer DD. Artesia, NM 88210				Indicate Type of Lease	state X	FEE	
ISTRICT III 000 Rio Brazos Rd., Aztec, NM 87410					∉State Oil & Gas Lease E-3635	No.	
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.)				Lease Name or Unit Agreement Name  SCOGGINS DRAW STATE "C" COM			
Type of Well: OIL GAS WELL X WELL	0	THER					
Name of Operator MARBOB ENERGY CORPORATION					₹Well No. 2		
Address of Operator PO BOX 227, ARTESIA, NM 88210					«Pool name or Wildcat RED LAKE GLORIETA YESO		
₄Well Location  Unit Letter B 1020 F	eet From The	NORTH	Line and	1950	Feet From The	EAST	Line
5	Townsor	18S	Ranne	28E	NMPM	EDDY	County

3464' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PLUG AND ABANDON ALTERING CASING REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ANBANDONMENT X CHANGE PLANS COMMENCE DRILLING OPNS. TEMPORARILY ABANDON CASING TEST AND CEMENT JOB PULL OR ALTER CASING OTHER: OTHER:

Range

## PLUG AND ABANDON WELL AS FOLLOWS:

12/3/01 - RIH & RETRIEVE RBP, SET CIBP @ 3290'. SPOT 10 SX P+ CMT PLUG ON CIBP. SPOT 25 SX P+ 2% CACL2 PLUG @ 1922' (CSG IS LOADED W/ GELLED BRINE BETWEEN PLUGS).

12/4/01 - TAG @ 1650'. CUT OFF 8 5/8" X 5 1/2" CSG HEAD, RUN 1" PVC BETWEEN 8 5/8" & 5 1/2" CSG TO 60'. CIRC CMT, PULL 1" & RUN DOWN 5 1/2" CSG TO 60'. CIRC CMT. CLEAN LOCATION & INSTALL DRY HOLE MARKER.

Thereby certify that the information above is true and complete to the best of my knowledge and belief

SIGNATURE

TITLE PRODUCTION ANALYST

DATE 12-14-01

TYPE OR PRINT NAME DIANA J. CANNON

TELEPHONE NO. 505-748-3303

(This space for State Use

APPROVED BY

CONDITIONS OF APPROVAL IF A

TITLE

Compliance Officer

DATE 2-25-02

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.