

Submit 3 Copies To Appropriate District Office

District I  
1625 N. French Dr., Hobbs, NM 87240

District II  
811 South First, Artesia, NM 87210

District III  
1000 Rio Brazos Rd., Aztec, NM 87410

District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

2040 South Pacheco  
Santa Fe, NM 87505

Form C-103

Revised March 25, 1999

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. <b>Type of Well:</b> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	WELL API NO. 30-015-31088
2. <b>Name of Operator</b> MARBOB ENERGY CORPORATION	Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. <b>Address of Operator</b> PO BOX 227, ARTESIA, NM 88211-0227	6. <b>State Oil &amp; Gas Lease No.</b> E-7179
4. <b>Well Location</b> Unit Letter <u>M</u> : <u>330</u> feet from the <u>SOUTH</u> line and <u>990</u> feet from the <u>WEST</u> line Section <u>6</u> Township <u>18S</u> Range <u>28E</u> NMPM <u>EDDY</u> County	7. <b>Lease Name or Unit Agreement Name:</b> LP STATE
8. <b>Well No.</b> 4	
9. <b>Pool name or Wildcat</b> ARTESIA QUEEN GRBG SA	
10. <b>Elevation (Show whether DR, RKB, RT, GR, etc.)</b> 3619' 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 ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: EXTEND APD ☒

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

WE REQUEST A ONE YEAR EXTENSION FOR THE APD ON THE ABOVE STATED WELL.

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

SIGNATURE [Signature] TITLE PRODUCTION ANALYST DATE 3/25/02

Type or print name DIANA J. CANNON

Telephone No. 505-748-3303

(This space for State use)

ORIGINAL SIGNED BY TIM W. GUM  
DISTRICT II SUPERVISOR

APPROVED BY [Signature] TITLE DISTRICT II SUPERVISOR DATE MAR 29 2002

Conditions of approval, if any: Last extension to 4/18/03

JMP, 2014

2014-2015