Submit 3 Copies to Appropriate District Office

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

CISÍ	Form C-103 Revised 1-1-89
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DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION

•	All	Revised 1-1-89	
ELL API NO.			
30-015-31984			

	2040 Pacneco St. Santa Fe, NM 87505		30-015-31984			
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			sIndicate Type of Lease  STATE FEE X			
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			₅State Oil & Gas Leas	e No.		
SUNDRY NOTICES AND I		IC BACK TO A				
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"		7Lease Name or Unit Agreement Name				
(FORM C-101) FOR SUCH PROPOSALS.)		BABY RUTH FEE				
Type of Well: OIL GAS WELL WELL	OTHER					
₂Name of Operator MARBOB ENERGY CORPORATION			₃Weil No. 2			
3Address of Operator PO BOX 227, ARTESIA, NM 88210			∍Pool name or Wildca CARLSBAD SO	•	W	
4Well Location Unit Letter E: 1980 Feet From The	NORTH Line	and 1090	Feet From The	WEST	Line	
Section 10 Township	22S Range	27E	<b>NMPM</b>	EDDY	County	
	evation (Show whether DF, RKB, RT,	GR, etc.)				

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 ANBANDONMENT

X

PULL OR ALTER CASING

CASING TEST AND CEMENT JOB

OTHER:

11

OTHER: TD, CMT CSG

12Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

TD WELL @ 4:30 AM ON 1/16/02. DRLD 6 1/8" HOLE TO 11875', RAN 295 JTS (11881') 4 1/2" 11.6# P110 LTC CSG TO 11875', CMTD W/ 300 SX SUPER H, PLUG DOWN @ 9:50 PM ON 1/18/02, DID NOT CIRC. TOC @ 8380'. WOC 18 HRS, TSTD CSG TO 1500# FOR 30 MIN - HELD OK.

thue and complete to the best of my knowledge and belief. I hereby certify

SIGNATURE

TITLE PRODUCTION ANALYST

DATE 01-21-02

TYPE OR PRINT NAME DIANA

CANNON

TELEPHONE NO. 505-748-3303

(This space for State Use)

APPROVED BY

CONDITIONS OF APPROVAL, IMANY:

ORIGINAL SIGNED BY TIM W. GUM DISTRICT II SUPERVISOR TITLE

DATE