Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103			
District I 1625 N. French Dr., Hobbs, NM 88240					Revised March 25, 1999 WELL API NO.		
District II ONGERNATION DE MOTON				30-015-30577			
District III	istrict III 1220 South St. Francis Dr			5. Indicate Type of Lease			
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505				STATE X FEE			
1220 S. St. Francis Dr., Santa Fe, NM 87505				6. State Oil & Gas Lease No.			
	ES AND REPORTS ON V				Unit Agreement N	ame:	
(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. Type of Well:	`	12	3456780				
Oil Well Gas Well X Other .				OXY MALT-O-MEAL STATE			
2. Name of Operator MARBOB ENERGY CORPORAT	/ 6	6	A 6 ₹ 1	8. Well No.	1		
3. Address of Operator	28			9. Pool name or	Wildcat		
PO BOX 227, ARTESIA,	NM 88211-022√2		250	EMPIRE; 1			
4. Well Location	/6	δ/ 7	SIR	/			
Unit LetterL:	1800 feet from the	SOUTH		660 feet from	n the WEST	ine	
Section 22	T	, , , , , , , , , , , , , , , , , , ,	28E	371 (D) (	C EDDY		
	Township 175  10. Elevation (Show wh		<u> </u>	NMPM	County EDDY		
	3610 <b>'</b>	GL					
11. Check App	propriate Box to Indic	cate Na					
NOTICE OF INTE		_		SEQUENT REF			
			REMEDIAL WORK	`	ALTERING CASING	3 <u> </u>	
TEMPORARILY ABANDON			COMMENCE DRIL	LLING OPNS.	PLUG AND ABANDONMENT		
	MULTIPLE [COMPLETION		CASING TEST AN	ID 🔲	ABANDONNEN		
	COMPLETION	_,	CEMENT JOB				
OTHER:	1 (0)			KOVER		X	
12. Describe proposed or complete of starting any proposed work). So or recompilation.	SEE RULE 1103. For Mi	tate all pultiple C	completions: Attach	d give pertinent date n wellbore diagram o	s, including estimate of proposed completi	ed date on	
TESTED MORROW SAN	DS AS FOLLOWS:						
PERF MORROW ZONE	@ 10003'-10005'	(12)	SET CIBP @	10100' PF	RF MORROW ZONE	7	
@ 10066'-10070'(1						2	
ACIDIZE PERFS 100	003 <sup>*</sup> -10005' W/ 25	50 GAI					
@ 9945'. WORKOVE	R UNSUCCESSFUL.	NON-	-ECONOMIC PRO	DUCTION. WAT	TER PRODUCTIVE	·	
I hereby certify that the information	sove is true and complete	to the b	est of my knowledg	ge and belief.		·	
SIGNATURE LAND	\	MTLE_	PRODUCTION		DATE 7/9/03	3	
Type or print name? DIANA	CANNON	*		Telon	hone No. (505) 7	48-3303	
(This space for State (ise)					10110 110, (303)		
APPPROVED BY	W. Gum	1	whitse	De mani	_DATE_ <b>JUL 1</b>	1 3882	
ACCENUYELLBY		T-TT = - #			./91) 11 11		