

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505



WELL API NO. 30-015-33062
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Wild Cap State Com
8. Well Number 1
9. OGRID Number 14049
10. Pool name or Wildcat Lusk; Bone Spring

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.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other

2. Name of Operator  
Marbob Energy Corporation OCT 17 2007

3. Address of Operator  
PO Box 227, Artesia, NM 88211-0227 OCD-AK

4. Well Location  
Unit Letter I : 1980 feet from the South line and 660 feet from the East line  
Section 36 Township 19S Range 31E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3502' GL

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water

Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material

12. 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 COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: Recompletion ☒

13. 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 recompletion.

Recompleted in the 2<sup>nd</sup> Bone Spring Sand zone as follows:

9/26/07 - Set CIBP + 35' cmt @ 12450'. Perf the Strawn @ 11560' - 11610' (20 shots).

9/27/07 - Acdz w/ 2000 gal NE Fe 15% HCl acid.

10/1/07 - Set CIBP + 35' cmt @ 11525'. Set CIBP + 35' cmt @ 10600'. Perf the 2<sup>nd</sup> Bone Spring Sand @ 9322' - 9336' (45 shots).

10/2/07 - Acdz w/ 1000 gal NE Fe 7 1/2% HCl acid.

10/5/07 - Frac w/ 113120 gal fluid & 200K# sand. AIR 49.5 BPM. AIP 2822#. ISIP 2530#.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Diana J. Briggs TITLE Production Analyst DATE 10/16/07

Type or print name Diana J. Briggs E-mail address: production@marbob.com Telephone No. (575) 748-3303

For State Use Only

APPROVED BY: FOR RECORDS ONLY TITLE DATE OCT 18 2007

Conditions of Approval (if any):