Submit 3 Copies To Appropriate District Office State of New Mexico	Form C-103
District I Energy, Minerals and Natural Resources	May 27, 2004 WELL API NO.
1625 N French Dr., Hobbs, NM 88240 District II 1301 W Grand Ave. Artesia, NM 88210 OIL CONSERVATION DIVISION	30-015-34557
District 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 FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	o. State on a das zoase ivo.
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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	GC Gradaskita Faa
PROPOSALS.)	SS Snakebite Fee 8. Well Number
1. Type of Well: Oil Well Gas Well Other OCT 17 2007	1
2. Name of Operator Marbob Energy Corporation OCD-ARTESIA	9. OGRID Number 14049
3. Address of Operator	10. Pool name or Wildcat
PO Box 227, Artesia, NM 88211-0227	Esperanza; Delaware
4. Well Location Unit Letter A: 205 feet from the North line and 205 feet from the East line	
Unit Letter A : 205 feet from the North line and Section 9 Township 22S Range 27E	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
3084' 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: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI	
PULL OR ALTER CASING	T JOB
	Acidize
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.	
9/21/07 – Acdz Delaware 1 perfs @ 5164' – 5186' w/ 500 gal NE Fe 15% HCl acid.	
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 of closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.	
	st DATE 10/16/807
Type or print name Diana J. Briggs DE-mail address: production@marbob.	com Telephone No. (5/5) /48-3303
FOR RECORDS UNL	D 00T 4 0 000
APPROVED BY:TITLE Conditions of Approval (if any):	DATE <u>OCT 1 8 2007</u>