Submit 3 Copies To Appropriate District Office	State of New Mey			Form C-103
District I 1625 N French Dr., Hobbs, NM 88240	Energy, Minerals and Nation	arces	WELL API NO.	June 19, 2008
District II 1301 W Grand Ave., Artesia, NM 88210	OIL CONSERVATION DI	VISION	30-015-33	
District III	1220 South St. Francis	1000 PM	5: Indicate Type of Leas	se FEDERAL   FEE
1000 Rio Brazos Rd , Aztec, NM 87410 District IV	Santa Fe, NM 8750	5	6. State Oil & Gas Leas	e No.
1220 S St Francis Dr., Santa Fe, NM 87505			Federal Lease No. N	IMNNM111406
I .	CES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG E	ACK TO A	7. Lease Name or Unit	Agreement Name
DIFFERENT RESERVOIR USE "APPLIC	CATION FOR PERMIT" (FORM C-101) FOR S		Double Trout	ole SWD
PROPOSALS )   1. Type of Well: Oil Well   Gas Well   Other SWD		8. Well Number		
2. Name of Operator	CFD 0 0.0000		9. OGRID Number	
Marbob Energy Corporation SEP 2 0 2000		14049		
3. Address of Operator PO Box 227, Artesia, NM 88211-0227 OCD-ARTESIA 10. Pool name or Wildcat SWD;				
4. Well Location				
Unit Letter 1 :	940feet from theNorth_	line and	791feet from the	Eastline
Section 3	Township 21S Range	25E		ounty
And the second s	11. Elevation (Show whether DR, RK 3298' GL		i i	4
APPERES SE	3270 G2	<u></u>	V Marie Mari	<u> </u>
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				
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL C	ASING/CEMENT	T JOB	
AC. OK				
OTHER. OTHER: Convert to SWD OTHER: Convert to SWD OTHER: On the stimated date of the stimate				
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion				
or recompletion.				
Converted to Salt Water Disposal well per Administrative Order SWD-1110.				
(See procedure and chart attached)				
Spud Date:	Rig Release Date:			
- Ibo				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
	(hu a a a )			
SIGNATURE JUNE	TITLE Produc	ction Analyst	DATE9	)/25/08
Type or print nameDiana J. Brig	gsN E-mail address:pr	oduction@marb	ob.com PHONE: _(5'	75) 748-3303_
For State Use Only				
APPROVED BY: Rugger	) Mus TITLE	•	DATE	
Conditions of Approval (if any):	11			