

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

RECEIVED

DEC 29 7 00 AM

OCD-ARTESIA

State of New Mexico  
Energy, Minerals and Natural Resources  
CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised May 08, 2003

<b>WELL API NO.</b> 30-015-32998
<b>5. Indicate Type of Lease</b> STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
<b>6. State Oil &amp; Gas Lease No.</b> 648-145
<b>7. Lease Name or Unit Agreement Name</b> HINT 15 STATE
<b>8. Well Number</b> 1
<b>9. OGRID Number</b> 14049
<b>10. Pool name or Wildcat</b> MILLMAN; MORROW, SOUTH (GAS)

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)	
<b>1. Type of Well:</b> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
<b>2. Name of Operator</b> MARBOB ENERGY CORPORATION	
<b>3. Address of Operator</b> P O BOX 227, ARTESIA, NM 88211-0227	
<b>4. Well Location</b> Unit Letter <u>E</u> : <u>1650</u> feet from the <u>NORTH</u> line and <u>990</u> feet from the <u>WEST</u> line Section <u>15</u> Township <u>19S</u> Range <u>28E</u> NMPM <u>EDDY</u> County <u>NM</u>	
<b>11. Elevation</b> (Show whether DR, RKB, RT, GR, etc.) 3503'	

<b>12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data</b>	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: INTMD CSG/CMT <input type="checkbox"/>

**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.

12/22/03 @3:30 AM DRLD 12 1/4" HOLE TO 2508', RAN 56 JTS (2515') 9 5/8" 36# J-55 CSG TO 2515.48', CMTD W/800 SX H/L, TAILED IN W/200 SX P+, PD @11:00 PM 12/22/03, CIRC 74 SX TO PIT, WOC 18 HRS, TSTD CSG TO 1500# - HELD OK.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Deborah L. Wilbourn TITLE GEOTECH DATE 12/23/03

Type or print name DEBORA L. WILBOURN Telephone No. (505) 748-3303  
(This space for State use)

APPROVED BY FOR RECORDS ONLY TITLE DATE DEC 30 2003  
Conditions of approval, if any: