

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED

FORM APPROVED  
OMB NO. 1004-0135  
Expires: November 30, 2000**SUNDRY NOTICES AND REPORTS ON WELLS** JUL 16 2004  
**Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.** **ARTESIA****SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMLC029395B
2. Name of Operator MARBOB ENERGY CORPORATION		6. If Indian, Allottee or Tribe Name
Contact: DIANA CANNON E-Mail: production@marbob.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address PO BOX 227 ARTESIA, NM 88211-0227	3b. Phone No. (include area code) Ph: 505.748.3303 Fx: 505.746.2523	8. Well Name and No. OXY DOC SLAWIN FED 1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 29 T17S R31E SWSW 460FSL 640FWL		9. API Well No. 30-015-33180
		10. Field and Pool, or Exploratory HACKBERRY; MORROW, EAST
		11. County or Parish, and State EDDY COUNTY, NM

## 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

## NOTIFY BLM BEFORE STARTING PLUGGING.

1. RIH OPEN END TO 5584'. (5 1/2" CICR SET @ 5584' W/ 6 SX CMT ON TOP). CIRC WELL W/ MUD.
2. POOH TO 4306'. SPOT 100' PLUG. (8 5/8" SHOE @ 4256'). WOC. TAG.
3. CUT & PULL 5 1/2" CSG FROM 3800' +/-.
4. RIH. SPOT 100' PLUG 50' IN & OUT STUB. WOC. TAG.
5. POOH TO 1695'. SPOT 100' PLUG. (11 3/4" SHOE @ 1645'). WOC. TAG.
6. POOH TO 472'. SPOT 100' PLUG. (16" SHOE @ 422'). WOC. TAG.
7. POOH TO 60'. CIRC CMT TO SURFACE.
8. CUT OFF WELL HEAD. INSTALL DRY HOLE MARKER.

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #38096 verified by the BLM Well Information System For MARBOB ENERGY CORPORATION, sent to the Carlsbad</b>	
Name (Printed/Typed) DIANA CANNON	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 07/15/2004

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office _____

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***