

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

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

Form C-103
Revised May 08, 2003

| | | |
|--|--|---|
| 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.) | | WELL API NO. 30-015-33756 |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other | | 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator MARBOB ENERGY CORPORATION | | 6. State Oil & Gas Lease No. |
| 3. Address of Operator PO BOX 227, ARTESIA, NM 88211-0227 | | 7. Lease Name or Unit Agreement Name AGAVE STATE |
| 4. Well Location Unit Letter <u>G</u> : <u>1980</u> feet from the <u>NORTH</u> line and <u>1670</u> feet from the <u>EAST</u> line Section <u>9</u> Township <u>19S</u> Range <u>28E</u> NMPM County <u>EDDY</u> | | 8. Well Number 1 |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3539' GL | | 9. OGRID Number 14049 |
| | | 10. Pool name or Wildcat WILDCAT; MISS |

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

RECOMPLETED IN THE MISS ZONE AS FOLLOWS: (INTENT FILED AS MORROW)
5/25/05 - SET CIBP @ 11200'. PERF THE MISS @ 10949' - 11074' (14 SHOTS).
DUMP 35' CMT ON CIBP.
5/26/05 - ACDZ PERFS W/ 1500 GAL CLAY SAFE HCL. SWAB/FLOW TEST.
5/27/05 - RE-PERF @ 10949' - 11074' (42 SHOTS). INSTALL 10K FRAC VLV.
5/31/05 - FRAC W/ 52600 GAL 65Q FOAM & 40K# 16/30 ULTRAPROP.

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

SIGNATURE Diana J. Briggs TITLE PRODUCTION ANALYST DATE 6/10/05

Type or print name DIANA J. BRIGGS Telephone No. (505) 748-3303

(This space for State use)

FOR RECORDS ONLY

APPROVED BY _____ TITLE _____ DATE JUN 15 2005

Conditions of approval, if any: