

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

Form C-103
May 27, 2004

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

WELL API NO. 30-015-02948
5. Indicate Type of Lease <input checked="" type="checkbox"/> FEDERAL STATE LEASE OTHER
6. LEASE NO. UNIT AGREEMENT
FEDERAL LEASE NO. NMLC058362
7. Lease Name or Unit Agreement Name DODD FEDERAL UNIT
8. Well Number 11
9. OGRID Number 14049
10. Pool name or Wildcat GRBG JACKSON SR Q GRBG SA
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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.)

1. Type of Well: Oil Well ☐ Gas Well ☐ Other ☒ WIW

2. Name of Operator
MARBOB ENERGY CORPORATION

3. Address of Operator
PO BOX 227, ARTESIA, NM 88211-0227

4. Well Location
Unit Letter J : 1980 feet from the SOUTH line and 1980 feet from the EAST line
Section 11 Township 17S Range 29E NMPM County EDDY

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input checked="" type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

PLUG AND ABANDON AS FOLLOWS:
NOTIFY BLM 24 HRS BEFORE STARTING PLUGGING OPERATION.

1. POOH W/ PKR & TBG.
2. SHOOT 4 SQZ HOLES @ 900' (50' BELOW BASE SALT @ 850').
3. SET CIBP ON TBG @ 2300'. SPOT 10 SX CLASS "C" NEAT CMT ON TOP OF CIBP. PULL UP TO 2100' & CIRC WELL BORE FULL OF 9 PPG BRINE MIXED W/ 25 SX PER 100 BBLD OF SALT GEL (APPX 35 BBLs CSG VOLUME).
4. PULL TBG TO 750'. PUMP 45 SX CLASS "C" TO END OF TBG (CMT IN/OUT OF CSG). TOOH W/ TBG. LOAD CSG. WOC A COUPLE OF HRS & TAG CMT W/ TBG.
5. SHOOT 4 SQZ HOLES @ 510' (50' BELOW 8 5/8" SHOE @ 460'). PUMP 40 SX CLASS "C" DOWN 7" CSG & UP ANNULUS TO FILL WELL F/ 510'-410' W/ CMT. WOC COUPLE HRS, TAG PLUG.
6. SHOOT 4 SQZ HOLES @ 100' (ABOVE CALC TOC BEHIND 8 5/8"). PUMP 60 SX CLASS "C" DOWN 7" CSG & UP ANNULUS & OUTSIDE 8 5/8" TO FILL WELL F/ 100' TO SURFACE W/ CMT.
7. CUT W/H & CSG OFF 3' BELOW GROUND LEVEL & REMOVE. WELD PLATE ONTO STUB. WELD 4" DRY HOLE MARKER ONTO PLATE @ 4' ABOVE GROUND LEVEL.
8. CUT OFF ANCHORS & RECLAIM LOCATION PER BLM SPECS. ***BLM FORM 3160-5 SUBMITTED ON 6/13/06***

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 or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Diana Briggs TITLE PRODUCTION ANALYST DATE 6/13/06

Type or print name DIANA J. BRIGGS E-mail address: PRODUCTION@MARBOB.COM Telephone No. (505) 748-3300
For State Use Only

APPROVED BY: [Signature] TITLE NMOCD DATE 6/13/06

Conditions of Approval (if any):