Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103
District I	Energy, Minerals and Natural Resources		Revised March 25, 1999 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II			30-015-32070
1301 W. Grand Ave., Artesia, NM 88210 District III			5. Indicate Type of Lease
District IV 1220 South St. Francis Dr. Santa Fe, NM 87505		STATE XX FEE	
District IV 1220 S. St. Francis Dr., Santa Fe, NM		6. State Oil & Gas Lease No. B-7244	
87505			
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.)			7. Lease Name or Unit Agreement Name:
1. Type of Well:	(Z)		BB STATE COM
Oil Well Gas Well	Other / Other	N C P	1
2. Name of Operator	ion (N	50 June 0 00	.8. Well No.
Marbob Energy Corporati	1011	- CO 11 10 10 10 10 10 10 10 10 10 10 10 10	
3. Address of Operator	IM 88211-0227	Br. Br.	9. Pool name or Wildcat UNDES. SCOGGIN DRAW, MORROW
P. O. Box 227, Artesia, N 4. Well Location	IVI 88211-0221	-0 ₀₀	UNDES. SCOGGIN DRAW, MORROW
4. Well Location			
Unit Letter M :	660 feet from the SOUT	H line and 9	990 feet from the WEST line
Section 2		Range 27E	NMPM EDDY County
10. Elevation (Show whether DR, RKB, RT, GR, etc.)			
3522' GL 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
	PLUG AND ABANDON	REMEDIAL WOR	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	ILLING OPNS.☐ PLUG AND ☐ ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AN	
OTHER:		OTHER: SPUD	CSG/CMT X
12. 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 recompilation.			
SPUD WELL @11:00 PM ON 9/20/03, DRLD 17 1/2" HOLE TO 341', RAN 8 JTS ((344') 13 3/8" 48# H-40 CSG TO 345'. CMTD W/ 500 SX P+, PD @2:45 PM, 9/21/03, CIRC 109 SX CMT TO PIT, WOC 18 HRS, TSTD CSG TO 600# FOR 20 MIN - HELD OK.			
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Allow J. William TITLE GeoTech .DATE 9/23/03 Type or print name Debora L. Wilbourn Telephone No. 505-748-3303			
		0	
APPPROVED BY	TITI F	District Sep	arvisor DATE OCT 02 200

Conditions of approval, if any: