Submit 3 Copies To Appropriate District Office	State of New Mexico	JUN 112009	Form C-103 June 19, 2008	
District I 1625 N French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	WELL API NO.	Julie 19, 2008	
District II 1301 W Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015-3		
District III	1220 South St. Francis Dr.	5. Indicate Type of Lea	rse 🖂	
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u>	Santa Fe, NM 87505	6. State Oil & Gas Leas		
1220 S St Francis Dr, Santa Fe, NM 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) 1. Type of Well: Oil Well Gas Well Other		7. Lease Name or Unit	Agreement Name	
		Cemetary 2	Fee Com	
		8. Well Number	i cc com	
		2		
2. Name of Operator Marbob Energy Corporation		9. OGRID Number	9. OGRID Number 14049	
3. Address of Operator		10. Pool name or Wilde	cat	
PO Box 227, Artesia, NM 88211-0227		Cemetary; Mo	rrow (Gas)	
4. Well Location				
Unit Letter O :	660feet from theSouthline and Township 20S Range 25E N			
Section 2 Township 20S Range 25E NMPM Eddy County 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
	3385' GR			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING				
TEMPORARILY ABANDON				
DOWNHOLE COMMINGLE				
OTHER.	CTUED.	Nama Chasas	5 21	
OTHER: Name Change 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.		•		
	·			
Please change the name of this well				
From: Cemetary 2 #2				
To: Cemetary 2 Fee Com #2 37728				
Effective Date: May 1, 2009				
Effective Date. Way 1, 20				
\$				
(}				
Spud Date:	Rig Release Date:			
			the control of the control	
Thereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE DATE 6/10/09 DATE 6/10/09				
Type or print name Diana J. Briggs E-mail address: _production@marbob.com PHONE: _(575) 748-3303 For State Use Only				
APPROVED BY: course. Conditions of Approval (if any):	Tour TITLE Teologis	DATE	6/19/09	