Submit 1 Copy To Appropriate District State of New Mexico Office			Form C-103 October 13, 2009
District I Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240 WELL API NO.		October 13, 2009	
District II 301 W. Grand Ave , Artesia, NM 88210 OIL CONSERVATION DIVISION		30-015-3° 5. Indicate Type of Leas	
District III 1220 South	District III 1220 South St. Francis Dr.		se FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		STATE 6. State Oil & Gas Leas	
1220 S. St. Francis Dr., Santa Fe, NM 87505			
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit A	Agreement Name
(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-P) POPOSALS)		Crava Diagon S	Stata Com
		Grave Digger S 8. Well Number	state Com
1. Type of Well: Oil Well Gas Well Other	AUG 31 2010	1H	
2. Name of Operator Marbob Energy Corporation	ADTECIA	9. OGRID Number	
Marbob Energy Corporation 3. Address of Operator Marbob Energy Corporation NMOCD ARTESIA		14049 10. Pool name or Wildc	
PO Box 227, Artesia, NM 88211-0227		Cemetary;	
4. Well Location			
Unit Letter : 330 feet from the	Northline and	380feet from the	Westline
Section 2 Township	20S Range 25E	NMPM Eddy	County
11. Elevation (Show w.	hether DR, RKB, RT, GR, etc., 3482' GR)	
中央で変更なという。	3102 GR	252.7 m 1524 25 4 4 142 27 1	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON	1	SEQUENT REPOR	IOF: RING CASING □
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND			
PULL OR ALTER CASING MULTIPLE COMPL	CASING/CEMEN	T JOB 🔲	_
DOWNHOLE COMMINGLE			
OTHER: Start Production	☑ OTHER:		П
13. Describe proposed or completed operations. (Clearly			
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
proposed completion of recompletion.			
This well was connected to pipeline on 7/21/10.			
Spud Date: Rig I	Release Date:		
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
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SIGNATURE Sillas TIT	LEProduction Analyst	DATE	07/27/2010
Type or print name Jeannie Sillas E-ma	il address:jsillas@marbob	.com PHONE: (575) 7	 748-3303
For State Use Only			
APPROVED BY SPILMS PILOTON	[/) FIP (.N	MUSOR DATE O	8/01/2011
APPROVED BY Conditions of Approval (if any): DATE OF OI / JON Conditions of Approval (if any):			