Submit 3 Copies to Appropriate District Office

DISTRICT II

Energy, 1

State of New Mexico als and Natural Resources Department

Form	C-103
Revise	ed 1-1-8

P.O. Drawer DD, Artesia, NM 88210

1000 Rio Brazos Rd., Aztec, NM 87410

TISTRIC				
P.O. Box	1980,	Hobbs,	NM	88240
	-	-		

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO. 30-005-63068

5. Indicate Type of Lease

STATE X FEE 6. State Oil & Gas Lease No.

	SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT U	SE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLU

G BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

State CF

Property

Code:

7. Lease Name or Unit Agreement Name

6542

WELL X 2. Name of Operator

Type of Well:

Marbob Energy Corporation 3. Address of Operator

OGRID #14049

11S

OTHER

8. Well No. 10

B - 8385

9. Pool name or Wildcat Wildcat; Group 3 Pool Code: 96034

P. O. Drawer 217, Artesia, NM Well Location

OTHER:

847 Feet From The Unit Letter ___C

NMPM

1765 Feet From The W Line

Section

Township

ship 11S Range 27E 10. Elevation (Show whether DF, RKB, RT, GR, etc.)

County

3739' GR

Line and

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

SUBSEQUENT REPORT OF:

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASING

PLUG AND ABANDONMENT

TEMPORARILY ABANDON

CHANGE PLANS

COMMENCE DRILLING OPNS. CASING TEST AND CEMENT JOB

PULL OR ALTER CASING

Spud, cmt csg OTHER:_

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.

> Spud well @ 11:00 p.m. 5/6/95. Drld 12 1/4" hol to 1435', ran 34 jts. 8 5/8" 24# csg to 1418', cmtd w/490 sx Halliburton Lite & 1/4# flocele MAY 1 2 1995 & 2% Cacl tailed w/200 sx Prem. Plus & 2% Cacl, plug down @ 6:00 p.m. 5/8/95, circ 25 sx to pitc WOC 18 hrs., tstd csg to 600# f/20 minutes--heid Reduced hole 7 7/8" and resumed drilling.

uplete to the pest of my knowledge and belief. I hereby certify

SIGNATURE

Production Clerk

DATE 5/11/95

CON. DIV.

DIST. 2

TYPE OR PRINT NAME

APPROVED BY-

TELEPHONE NO.748-3303

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM

DISTRICT H SUPERVISOR

MAY 1 5 1995 DATE

CONDITIONS OF APPROVAL, IF ANY: