

Submit to Appropriate District Office  
 State Lease - 6 copies  
 Fee Lease - 5 copies  
**DISTRICT I**  
 P.O. Box 1980, Hobbs, NM 88240

**DISTRICT II**  
 P.O. Drawer DD, Artesia, NM 88210

**DISTRICT III**  
 1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
 Energy, Minerals and Natural Resources Department

**OIL CONSERVATION DIVISION**  
 P.O. Box 2088  
 Santa Fe, New Mexico 87504-2088

Form C-105  
 Revised 1-1-89

WELL API NO.  
 30-005-63120

5. Indicate Type of Lease  
 STATE  FEE

6. State Oil & Gas Lease No.  
 VA-1234

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

1a. Type of Well:  
 OIL WELL  GAS WELL  DRY  OTHER \_\_\_\_\_

b. Type of Completion:  
 NEW WELL  WORK OVER  DEEPEN  PLUG BACK  DIFF RESVR  OTHER \_\_\_\_\_

2. Name of Operator  
 MARBOB ENERGY CORPORATION

3. Address of Operator  
 P. O. BOX 227, ARTESIA, NM 88210

7. Lease Name or Unit Agreement Name  
 KATIE ELDER STATE

8. Well No.  
 3

9. Pool name or Wildcat  
 CHISUM; SAN ANDRES SOUTH

4. Well Location  
 Unit Letter N : 990 Feet From The S Line and 2310 Feet From The W Line

Section 36 Township 11S Range 27E NMPM CHAVES County

10. Date Spudded 3/12/97 11. Date T.D. Reached 3/17/97 12. Date Compl. (Ready to Prod.) P&A 13. Elevations (DF& RKB, RT, GR, etc.) 3767' GR 14. Elev. Casinghead

15. Total Depth 2800' 16. Plug Back T.D. 17. If Multiple Compl. How Many Zones? 18. Intervals Drilled By Rotary Tools 0-2800' Cable Tools

19. Producing Interval(s), of this completion - Top, Bottom, Name 20. Was Directional Survey Made NO

21. Type Electric and Other Logs Run SDSM, DLM 22. Was Well Cored NO

**CASING RECORD (Report all strings set in well)**

CASING SIZE	WEIGHT LB/FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24#	446'	12 1/4"	175 SX CIRC	

**LINER RECORD**

**TUBING RECORD**

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

26. Perforation record (interval, size, and number) 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.  
 DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED

**PRODUCTION**

28. Date First Production Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Prod. or Shut-in)

Date of Test Hours Tested Choke Size Prod'n For Test Period Oil - Bbl. Gas - MCF Water - Bbl. Gas - Oil Ratio

Flow Tubing Press. Casing Pressure Calculated 24-Hour Rate Oil - Bbl. Gas - MCF Water - Bbl. Oil Gravity - API - (Corr.)

29. Disposition of Gas (Sold, used for fuel, vented, etc.) Test Witnessed By

30. List Attachments  
 LOGS

31. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief

Signature Rhonda Nelson Printed Name RHONDA NELSON Title PRODUCTION CLERK Date 4/1/97

