

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

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

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-005-63171

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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

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

RIO BRAVO FEE

8. Well No.

1

9. Pool name or Wildcat

RACE TRACK; DEVONIAN, S.E.

4. Well Location

Unit Letter B : 478 Feet From The NORTH Line and 2525 Feet From The EAST Line

Section 30 Township 10S Range 28E NMPM CHAVES ~~DOX~~ County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3739' GR

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: SPUD, CMT CSG ☒

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 @ 8:15 A.M. 6/6/98. DRLD 17 1/2" HOLE TO 269', RAN 6 JTS
13 3/8" K-55 48# CSG TO 252', CMTD W/300 SX PREM PLUS, PLUG DOWN @
5:30 P.M., CIRC 75 SX TO SURF. WOC 18 HRS, TSTD CSG TO 600# FOR 20
MINUTES - HELD OK.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Rhonda Nelson

TITLE

Production Clerk

DATE 6/8/98

TYPE OR PRINT NAME

TELEPHONE NO. 748-3303

(This space for State Use)

APPROVED BY

Jim W. Green BGA

TITLE

District Supervisor

DATE

6-11-98

CONDITIONS OF APPROVAL, IF ANY: