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U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

RECEIVED

SEP 22 1975

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>	
5. State Oil & Gas Lease No. B-2071	
7. Unit Agreement Name	
8. Farm or Lease Name N. G. Phillips State	
9. Well No. 15	
10. Field and Pool, or Wildcat East Empire Yates -SR	
12. County Eddy	

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. OIL WELL ☒ GAS WELL ☐ OTHER ☐ **ARTESIA, OFFICE**

2. Name of Operator
Marbob Energy Corporation

3. Address of Operator
P. O. Box 304, Artesia, N. M. 88210

4. Location of Well
UNIT LETTER **J** **2310** FEET FROM THE **South** LINE AND **2310** FEET FROM
THE **East** LINE, SECTION **27** TOWNSHIP **17 S** RANGE **28 E** NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3655 G L

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. 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.

Pulled 7" csg.

Ran 880 ft 4 1/2" 10.5 lb new casing

9/15/75 Halliburton cemented w/ 100 sk Halliburton Lite, 25 sk Class C and 25 sk Pozmix, cement circulated

9/15/75 waiting on pulling unit

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

SIGNED Dorothy Hammond TITLE Agent DATE 9/18/75

APPROVED BY W. A. Gressett TITLE SUPERVISOR, DISTRICT II DATE SEP 24 1975

CONDITIONS OF APPROVAL, IF ANY: