

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 May 27, 2004

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. <b>30-025-00534</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: <b>MalMar Unit</b>
8. Well No. <b>204</b>
9. OGRID Number <b>151228</b>
10. Pool name or Wildcat <b>Maljamar Grayburg/San Andres</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

**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  
**Mar Oil and Gas Corp**

3. Address of Operator  
**PO Box 5155, Santa Fe, NM 87502**

4. Well Location  
 Unit Letter **D** : **660** feet from the **North** line and **660** feet from the **West** line  
 Section **13** Township **17S** Range **32E** NMPM County **Lea**

Pit or Below-grade Tank Application  or Closure

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance to nearest surface water \_\_\_\_\_  
 Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material: \_\_\_\_\_

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

4/19/07 MIRU RIH w/ tbg to 4050. Spot 25 sx cement. Circulate hole w/ mud laden fluid. POH. SDFN.  
 4/20/07 Finish POH w/ tbg. RIH w/ wireline. Perf. 5 1/2 csg. @ 2450. RIH w/ packer, set @ 2100. Could not pump into perfs. Release pressure, Spot 20 sx. cement. POH w/ 30 jts.  
 4/23/07 RIH and tagged plug @ 1790. Perf. csg. @ 1200. RIH set packer @ 900. SQZ. 50 sx. cement. WOC. SDFN.  
 4/24/07 Tagged plug @ 1075. POH. Perf. csg @ 350. SQZ, 100 sx cement down 5 1/2 and up 8 5/8 to surface. Cut off wellhead, weld on Dry Hole Marker. Clean location Rig down move off.

Approved as to plugging of the Well Bore.  
 Liability under bond is retained until surface restoration is completed.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCDC guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE Billy E. Prichard TITLE Foreman DATE 5/29/2007

Type or print name Billy E. Prichard E-mail address: shabillron01@warpedriveonline.com Telephone No. 505-390-9100

APPROVED BY Gary W. Wank TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE 04 2007

Conditions of Approval (if any):