

RECEIVED

Form 3160-3
(April 2004)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

MAR 18 2008

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE- Other instructions on reverse side.

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator **Marbob Energy Corporation**

3a. Address
PO Box 227, Artesia, NM 88211-0227

3b. Phone No. (include area code)
575-748-3303

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1650 FNL 660 FWL, Sec. 9-T19S-R32E, Unit E

5. Lease Serial No.

NMNM13422B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

Falcon Federal #1

9. API Well No.

30-025-38421

10. Field and Pool, or Exploratory Area

Lusk Bone Spring

11. County or Parish, State

Lea Co., NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input checked="" type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Recompleted in the 2nd Bone Spring Sand as follows:

2/5/08 - Set CIBP + 35' cmt @ 11450'. Perf the Wolfcamp @ 10718' - 10794' (20 shots).

2/6/08 - Acdz the Wolfcamp w/ 2500 gal NE Fe 15% HCl acid.

2/12/08 - Set CIBP + 35' cmt @ 10675'. Perf the Bone Spring Lime @ 9834' - 9933' (18 shots).

2/13/08 - Acdz the Bone Spring Lime w/ 1500 gal NE Fe 15% HCl acid.

2/14/08 - Set CIBP + 10' cmt @ 9800'. Perf the 2nd Bone Spring Sand @ 9294' - 9312' (38 shots).

2/15/08 - Acdz the 2nd Bone Spring Sand w/ 1000 gal NE Fe 7 1/2% HCl acid.

2/19/08 - Frac the 2nd Bone Spring Sand w/ 100K# sand & 78380 gal fluid. AIR 34 BPM. AIP 2558#. ISIP 2518#.

2/20/08 - Tag sand @ 9700'. Clean out to cmt @ 9790'. Drill out 10' cmt & CIBP @ 9800'. Push to 10400'. Circ hole clean.

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed)

Diana J. Briggs

Title **Production Analyst**

Signature

Date

03/17/2008

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Chris Williams

OC DISTRICT SUPERVISOR/GENERAL MANAGER

Date

APR 16 2008

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

(Instructions on page 2)

2A Lusk Strawn

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

FORM APPROVED
OMB NO 1004-0137
Expires March 31, 2007

1a Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		5. Lease Serial No NMNM13422B							
b. Type of Completion <input type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input checked="" type="checkbox"/> Plug Back <input type="checkbox"/> Diff Resvr., Other _____		6. If Indian, Allottee or Tribe Name							
2. Name of Operator Marbob Energy Corporation		7. Unit or CA Agreement Name and No							
3. Address PO Box 227 Artesia, NM 88211-0227		8. Lease Name and Well No. Falcon Federal #1							
3a. Phone No (include area code) 575-748-3303		9. AFI Well No. 30-025-38421							
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface 1650 FNL 660 FWL, Unit E At top prod interval reported below Same At total depth Same		10. Field and Pool, or Exploratory Lusk Bone Spring North							
		11. Sec., T., R., M., on Block and Survey or Area Sec. 9-T19S-R32E							
		12. County or Parish Lea							
		13. State NM							
14. Date Spudded 09/03/2007		15. Date T D Reached 10/05/2007							
		16. Date Completed 02/22/2008 <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod							
17. Elevations (DF, RKB, RT, GL)* 3643' GL									
18. Total Depth MD 11850' TVD 11850'		19. Plug Back T D MD 10400' TVD 10400'							
20. Depth Bridge Plug Set MD 10400' TVD 10400'									
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) None		22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit report) Directional Survey? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit copy)							
23. Casing and Liner Record (Report all strings set in well)									
Hole Size	Size/Grade	Wt. (#/ft)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No of Sks & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17 1/2"	13 3/8"	54.5#	0	936'		800 sx		0	None
12 1/4"	9 5/8"	36 & 40#	0	3908'		1450 sx		0	None
7 7/8"	5 1/2"	17#	0	11850'		1465 sx		3600' TS	None
24. Tubing Record									
Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	
2 7/8"	10089'								
25. Producing Intervals									
Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf Status			
A) Bone Spring	9294'	9933'	10718' - 10794'		20	Closed - CIBP @ 10675'			
B)			9834' - 9933'		18	Open			
C)			9294' - 9312'		38	Open			
D)									
27. Acid, Fracture, Treatment, Cement Squeeze, etc.									
Depth Interval	Amount and Type of Material								
10718' - 10794'	Acidz w/ 2500 gal NE Fe 15% HCl acid.								
9834' - 9933'	Acidz w/ 1500 gal NE Fe 15% HCl acid.								
9294' - 9312'	Acidz w/ 1000 gal NE Fe 7 1/2% HCl acid. Frac w/ 100K# sand & 78380 gal fluid.								
28. Production - Interval A									
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
02/23/2008	02/24/2008	24	→	20	0	220			Pumping
Choke Size	Flwg SI	Csg Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						
28a. Production - Interval B									
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Flwg SI	Csg Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

(See instructions and spaces for additional data on page 2)

RECEIVED
APR 01 2008
HOBBS OCD
ACCEPTED FOR RECORD
MAR 20 2008
JERRY FANT
PETROLEUM GEOLOGIST

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg Press Flwg SI	Csg Press	24 Hr Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg Press Flwg SI	Csg Press	24 Hr Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

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

Sold

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc	Name	Top Meas. Depth

RECEIVED

MAY 18 PM 3:05

BUREAU OF LAND MGMT
CARROLL COUNTY OFFICE

32. Additional remarks (include plugging procedure):

33. Indicate which items have been attached by placing a check in the appropriate boxes:

- ☐ Electrical/Mechanical Logs (1 full set req'd.)
 ☐ Geologic Report
 ☐ DST Report
 ☐ Directional Survey
 ☐ Sundry Notice for plugging and cement verification
 ☐ Core Analysis
 ☐ Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

Name (please print) **Diana J. Briggs**Title **Production Analyst**

Signature

Date **03/17/2008**

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212 make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

REFERENCE SHEET FOR
UNDESIGNATED WELLS

	Fm	Pm	N	Pc
17-21 W	XX	XX		XX

1. Date.	4/16/2008
2. Type of Well:	
Oil:	XX
Gas:	
3. County:	LEA

paragraph

4 Operator	MARBOB ENERGY CORP			API NUMBER	30 - 025 - 38421
5 Address of Operator	PO BOX 227 ARTESIA NM 88211				
6 Lease name or Unit Agreement Name	FALCON FEDERAL			7 Well Number	# - 1
8 Well Location	Unit Letter E 1650 feet from the N line and 660 feet from the W line Section 9 Township 19S Range 32E				
9 Completion Date	2/22/2008	11 Perfs	Top	Bottom	TD
			9294	9933	11850
10 Name of Producing Formation(s)	BONE SPRING	12 Open Hole Casing shoe	Bottom	PBTD	
				10400	
13 C-123 Filed	Date	15 Name of Pool Requested or temporary Wildcat designation	Pool ID num		
Y	N XX	LUSK;BONE SPRING, NORTH	41450		
16 Remarks	EXTEND				

TO BE COMPLETED BY DISTRICT GEOLOGIST		
17 Action taken	18 Pool Name	Pool ID num
EXTEND	LUSK;BONE SPRING, NORTH	41450
<p>T 19 S, R 32 E</p> <p>SEC 8: NE/4</p> <p>SEC 9: NW/4</p>		

19 Advertised for HEARING	20 Case Number
21 Name of pool for which was advertised	Pool ID num
LUSK;BONE SPRING, NORTH	41450
22 Placed in Pool	23 By order number
	R-

DISTRICT I
1625 N. FRENCH DR., HOBBES, NM 88240

DISTRICT II
1301 W. GRAND AVENUE, 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 Department

OIL CONSERVATION DIVISION
1220 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

Form C-102
Revised October 12, 2005
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

WELL LOCATION AND ACREAGE DEDICATION PLAT

☐ AMENDED REPORT

API Number 30-025-38421	Pool Code 41452	Pool Name Lusk BONE SPRING North
Property Code 36522	Property Name FALCON FEDERAL	Well Number 1
OGRID No. 14049	Operator Name MARBOB ENERGY CORPORATION	Elevation 3643'

Surface Location

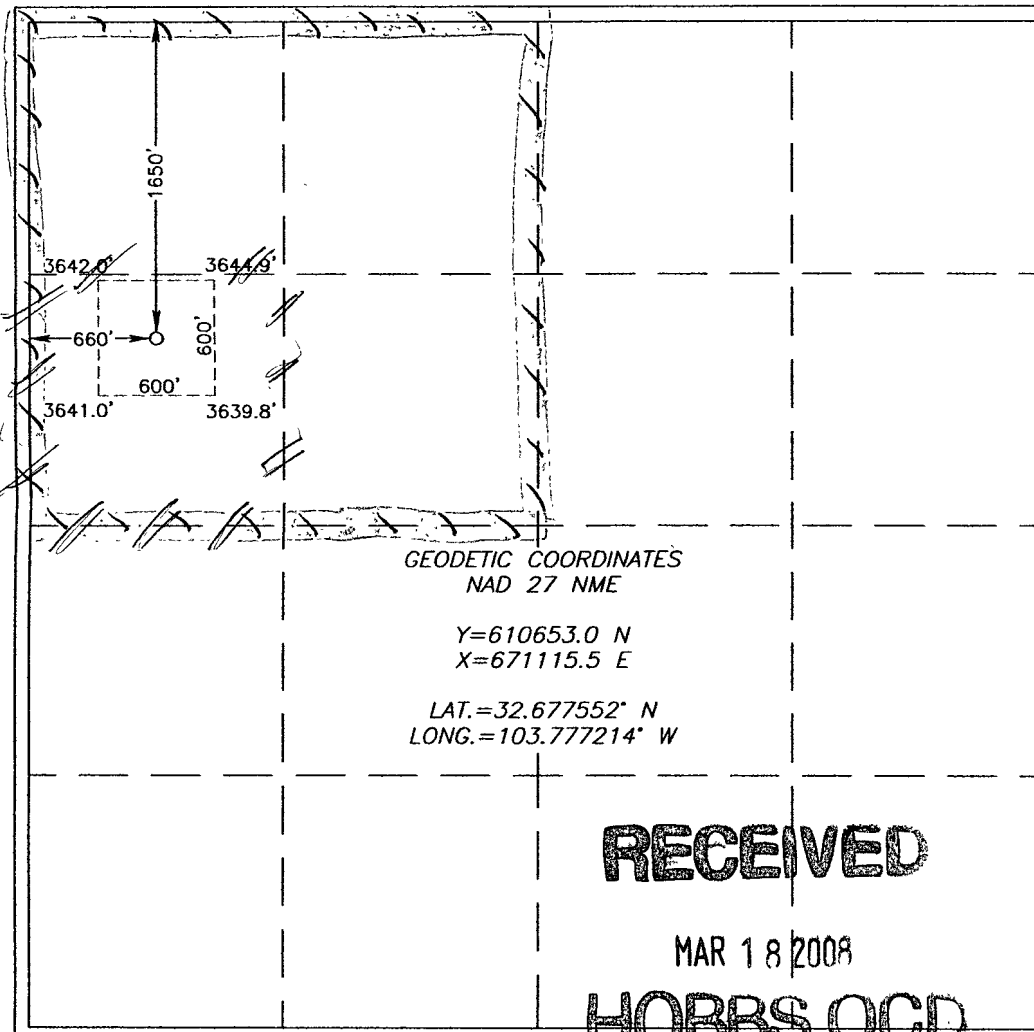
UL or lot No. E	Section 9	Township 19-S	Range 32-E	Lot Idn	Feet from the 1650	North/South line NORTH	Feet from the 660	East/West line WEST	County LEA
--------------------	--------------	------------------	---------------	---------	-----------------------	---------------------------	----------------------	------------------------	---------------

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
---------------	---------	----------	-------	---------	---------------	------------------	---------------	----------------	--------

Dedicated Acres 160	Joint or Infill	Consolidation Code	Order No.
------------------------	-----------------	--------------------	-----------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



OPERATOR CERTIFICATION	
I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.	
Signature Diana J. Briggs	Date 3/17/08
Printed Name DIANA J. BRIGGS	
PRODUCTION ANALYST	
SURVEYOR CERTIFICATION	
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.	
DECEMBER 13, 2006	
Date Surveyed Signature & Seal of Professional Surveyor GARY EIDSON	LA
Certificate No. GARY EIDSON 12641	