

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  
June 19, 2008

RECEIVED

MAY 11 2009

HOBBSON

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

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)		WELL API NO. 30-025-38600 ✓
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> SWD		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> ✓
2. Name of Operator Marbob Energy Corporation ✓		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 227, Artesia, NM 88211-0227		7. Lease Name or Unit Agreement Name Pick SWD ✓
4. Well Location Unit Letter <u>J</u> : <u>2310</u> feet from the <u>South</u> line and <u>2310</u> feet from the <u>East</u> line Section <u>23</u> Township <u>18S</u> Range <u>33E</u> NMPM Lea County ✓		8. Well Number <u>2</u> ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3871' GR		9. OGRID Number 14049 ✓
		10. Pool name or Wildcat SWD; Delaware ✓

12. 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 ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER Commencement of Injection ☒

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.

3/28/09 – Effective date of commencement of injection into this Salt Water Disposal well.

(See Administrative Order SWD-1155)

Spud Date:

Rig Release Date:

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

SIGNATURE Diana J. Briggs TITLE Production Manager DATE 5/8/09

Type or print name Diana J. Briggs E-mail address: production@marbob.com PHONE: (575) 748-3303

For State Use Only

APPROVED BY: James W. Hill TITLE DISTRICT 1 SUPERVISOR DATE MAY 12 2009

Conditions of Approval (if any):