

DEC 201

OCD HOURS

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0137 Expires July 31, 2010

WESLEY W. INGRAM

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NMNM086

If Indian Allottee, or Tribe Name

HOBUSUCOUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an

SUBMIT IN TRIPLICATE - Other Instructions on page 2.	abanu	oned wen. Ose Form 3	100-3 (7	(PD) for Such pr	oposais.			
Name of Operators		TRIPLICATE - Other I	nstruc	tions on page 2	2.	7 If Unit or CA	Agreement Name and/or No	
Marbob Energy Corporation A Address PO Box 227 Artesta, NM 88211-0227 4 Location of Well it ownger, Sex. Jr., W. J. an Norwy Descriptions 1650 FNL 660 FWL. Sec. 25-T19S-R34E, Unit E 12 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION 12 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION 13 Description of future Address Address Deepen Production State, Resume Water Man-old					8 Well Name an	d No		
Marbob Energy Corporation A Address PO Box 227 Artesta, Mar Re211-U227 Interior of Well analyses of Experiment Assessment Programs (575) 748-3303 Interior of Well analyses of Experiment Assessment Programs (575) 748-3303 Interior of Well analyses of Experiment Assessment Programs (575) 748-3303 Interior of Well analyses of Experiment Assessment Programs (575) 748-3303 Interior of Well analyses of Experiment Assessment Programs (575) 748-3303 Interior of Well analyses of Experiment Assessment Programs (575) 748-3303 Interior of Experiment Assessment (575) 748-303 Interior of Experiment (575) 748-303 Interior of Experiment (575) 748-303 Interior of Experiment (575) 748-303 Interi	2 Name of Operator					- -	lawg Federal #1	
PO Box 227 Artesta, NM 88211-10227 4 Location of Well if longing Sec. 7, 8, 11, or Survey Decorptions 1650 FNL 660 FWL. Sec. 25-T19S-R34E, Unit E 12 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA TYPE OF SUBMISSION 17 PE OF ACTION Notice of Intent		Marbob Energy Corp	oration					
Artesta, NM 88211-0227 Loadmon of Well (it monger, No. 1, N. W. or, Norwey Descriptions) Lea, Brone Spring		x 227		3b Phone No (incli	ude area code)		20 025 29251	
1650 FNL 660 FWL, Sec. 25-T19S-R34E, Unit E 12 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA TYPE OF SUBMISSION				(575) 748-3303				
12 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA TYPE OF SUBMISSION Audize	4 Location of Well (Lootage, Sec., L	, R. M., or Survey Description)	-	· · · · · · · · · · · · · · · · · · ·	Le	ea; Bone Spring	
TYPE OF SUBMISSION Notice of Intent	1650 FN	L 660 FWL, Sec. 25-7	∩19S-F	R34E, Unit E				
TYPE OF SUBMISSION Acidize	12 CHECK ADDROL	DDIATE DOV(S) TO INI	DICAT	T MA CHIDI (AC	NATION DUNC			
Notice of Intent		MATE BOX(5) TO IN	DICAT			KI, OR OTHER	CDATA	
Anthony Despen					PE OF ACTION		Ö	
Subsequent Report	X Notice of Intent	Acidize		Deepen	Production (Start Resume)	Water Shut-off	
Change Plans		Altering Casing		Fracture freat	Reclamation		Well Integrity	
Final Abandomment Notice	Subsequent Report	Casmp Repair		New Construction	X Recomplete		Other	
13 Describe Proposed of 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 recomplete horizontally, give subsurface locations and measured and true vertical depths or pertinent markets and sauds Attach the Bond under which the work will performed or provide the Bond No on file with the BLM BIA. Required subsequent reports shall be filed only following completion of the involved operations if the operation results in a multiple completion or recompletion in a new interval. a Form 3160-1 shall be filed once testing has been completed. Final handomient Notice shall be filed only after all requirements, including reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.) Marbob Energy Corporation proposes to perforate, acidize, test & possibly frac the Bone Spring Avalon Shale zone as follows: Set 10K CBP @ 9100'. Bone Spring Avalon Shale 8826' (15 shots) 2000 gal NE Fe 7 1/2% HCl 8908' (15 shots) Submit Subsequent Submit Production Manager The heigh centry that the foregoing is true and correct Name reported. Approved by This sprace for Federal or State Option State Option Manager Signature Date December 21, 2009 This sprace For Federal or State Option Manager Signature Date December 22, 2009 This sprace For Federal or State Option Manager Signature Date December 22, 2009 This sprace for Federal or State Option Manager December 22, 2009 December 21, 2009 This sprace for Federal or State Option of this notice does not warrant of		Change Plans		Plug and abandon	Temporarily	Abandon		
If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and the vertical depths or pertinent markets and sands. Attach the Bond under which the work with the BLM druth the BLM Required subsequent reports shall be filed within 50 days following completion of the involved operations if the operation results in a multiple completion or recompletion in a new interval, a Form 3160-1 shall be filed once testing has been completed. Final handoniment Notice shall be filed once testing has been completed. Final handoniment Notice shall be filed once testing has been completed. Final handoniment Notice shall be filed once testing has been completed. Final inspection in a new interval, a Form 3160-1 shall be filed once testing has been completed. Final inspection in a new interval, a Form 3160-1 shall be filed once testing has been completed. Final inspection in a new interval, a Form 3160-1 shall be filed once testing has been completed. Final inspection in a new interval, a Form 3160-1 shall be filed once testing has been completed. Final inspection in a new interval, a Form 3160-1 shall be filed once testing has been completed. Final inspection in a new interval, a Form 3160-1 shall be filed once testing has been completed. Final inspection in a new interval, a Form 3160-1 shall be filed once testing has been completed. Final inspection in a new interval, a Form 3160-1 shall be filed once testing has been completed from his of the filed once testing has been completed from his of the filed once testing has been completed. Final inspection in a new interval, a Form 3160-1 shall be filed once testing has been completed from his of the filed once testing has been completed from his of the filed once testing has been completed from his of the filed once testing has been completed from his of the filed once testing has been completed from his of the filed once testing has been completed from his of the filed once testing has been completed from his of the filed once test	Final Abandonment Notice	Convert to Injection	X	Plug back	Water Dispo	sal		
Submit Subsequent Sundry with production tests The thereby centry that the foregoing is true and correct Name the missioned Typedy Duffa Briggs Date December 21, 2009 THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved by Conditions of approval, if any are attached Approval of this notice does not warrant of	zone as follows: Set 10K CBP @ 9100'.				ossibly frac the			
Signature Date December 21, 2009 THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved by Conditions of approval, if any are attached Approval of this notice does not warrant or		8	908' (15 shots)	, with			
THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved by Conditions of approval, if any are attached Approval of this notice does not warrant or	Name thanned Typed) Dunha	I Briggs			KO			
Approved by Conditions of approval, if any are attached Approval of this notice does not warrant or	- Annote					December 21, 2		
Approved by Title Date Conditions of approval, if any are attached Approval of this notice does not warrant or		THIS SPACE F	UR FE	DERAL OR ST	ATE OFFICE			
Conditions of approval, if any are attached. Approval of this notice does not warrant or	Approved by			Title		1 11	DEC 2 4 2009	
	Conditions of approval, if any are attach	ed Approval of this notice doc	s not wa	rrant or		Tivale	MIK	

centry that the applicant holds legal or equitable title to those rights in the subject lease of the would entitle the applicant to conduct operations thereon.

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 States my talse, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

Energy, Minerals & Natural Resources Department Submit to Appropriate District Office 1301 W. Grand Avenue, Artesia, NM 8821 MAK Z. . . OIL CONSERVATION DIVISION State Lease - 4 Copies District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410HOBBSUCL Fee Lease - 3 Copies Santa Fe, NM 87505 District IV ☐ AMENDED REPORT 1220 S. St. Francis Dr., Santa Fe, NM 87505 WELL LOCATION AND ACREAGE DEDICATION PLAT API Number Pool Code 37570 Lea; Bone Spring 30-025-38351 Well Number SProperty Name Property Code Hawg Federal 36212 ⁹ Elevation 8 Operator Name OGRID No. 3761 Marbob Energy Corporation 14049 ¹⁰ Surface Location Range Lot Idn Feet from the North/South line Feet from the East/West line County UL or lot no. Section Township 34E 1650 North 660 West Lea E 25 19S Bottom Hole Location If Different From Surface Feet from the East/West line County UL or let no. Township Lot Idn North/South line Feet from the Section Range 12 Dedicated Acres ¹³ Joint or Infill 14 Consolidation Code 15 Order No. NSL-6030 80 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. 17 OPERATOR CERTIFICATION I hereby certify that the information contained 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 a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling 3/19/09 Stormi Davıs Production Assistant Printed Name ¹⁸SURVEYOR 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 Date of Survey Signature and Seal of Professional Surveyor REFER TO ORIGINAL PLAT Certificate Number

Form C-102

Revised October 12, 2005

1625 N. French Dr., Hobbs, NM 88240 CEIVES. State of New Mexico