Submit 3 Copies To Appropriate Distr Office		State of New Mexico			Form C-103 Revised March 25, 1999	
District I District II District II District II District II ON CONSERVATION DIVISION					WELL API NO. 30-025-01470	
District III OIL CONSERVATION DIVISION District III 1301 W. Grand Ave., Artesia, NM 88210 1220 South St. Francis Dr.					Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505					STATE X FEE 6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505					B2229	
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:					7. Lease Name or Unit Agreement Name: MALMAR UNIT	
Oil Well x Gas Well Other 2. Name of Operator					8. Well No. 104	
Mar Oil and Gas Corp.						
3. Address of Operator P.O. Box 5155 Santa Fe NM 87502					9. Pool name Maljamar (GB-SA)	
4. Well Location						
Unit Letter_D_: 660 feet from the North line and 660 feet from the West line						
Section 18		Township	17S	Range 33E	NMP	M County LEA
		10. Elevation (Show)	vhether DF	R, RKB, RT, GR, etc	2.)	
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data						
NOTICE OF INTENTION TO: SUBS					SEQUENT RE	PORT OF:
PERFORM REMEDIAL WORK		PLUG AND ABANDON	! 🔲	REMEDIAL WOR	к 🗆	ALTERING CASING
TEMPORARILY ABANDON		CHANGE PLANS		COMMENCE DRI	LLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING		MULTIPLE COMPLETION		CASING TEST AN CEMENT JOB	ND 🗆	
OTHER:				OTHER: NON C	ompliance	X
12. 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 recompilation. New Well Sign was installed MAR Oil & Gas Corp, Malmar Unit 104 has been a shut in WIW March 1, 2004 MAR has place production equipment on well March 4, 2004 is the first day of production						
I hereby certify that the informa	ation	above is true and comple	te to the be	est of my knowledge	e and belief.	
SIGNATURE	1		TI	TLE: VP Operation	ns DATE	:March 17, 2004
Type or print name Duane C V	/inkle	er			Telep	hone No.505-989-1977
(This space for State use)			C FIELD R	EPRESENTATIVE I	I/STAFF MANAG	FR MAD O
APPPROVED BY Laur	U	1 1 . 1	TITLE			ER MAR 2 3 2004
Conditions of approval, if any:					6000	22 25 26 27 28 29 30 37 2 20 20 30 37 2 20 20 30 37