

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. LC-028793C
2. Name of Operator MARBOB ENERGY CORPORATION	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Drawer 217 Artesia, N.M. 88210	7. If Unit or CA, Agreement Designation Burch Keely Unit
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980 FNL 660 FEL Sec 18 T-17-S R-30-E Unit H	8. Well Name and No. Burch Keely Unit #10
	9. API Well No. 30-015-20623
	10. Field and Pool, or Exploratory Area Grbg Jackson SR Q Grbg SA
	11. County or Parish, State Eddy Co. N.M.

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

- (1) Set 4½ CIBP @2347' Cap w/35' cement 1-21-92
- (2) Load hole w/mud
- (3) Perforated 4½ casing @ 875'
Squeeze 50 sks cement W.O.C. Tag cement top # 718'
- (4) Perforated 4½ casing @ 550'
Squeeze 50 sks cement W.O.C. Tag cement top @374'
- (5) Perforated 4½ casing, 8 5/8 casing @ 100'
squeeze 70 sks cement to surface between 4½ & 8 5/8 & 8 5/8 open hole

I hereby certify that the foregoing is true and correct

Signed Raymond Maldonado Title Supervisor Date 11-14-94

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

18 U.S.C. Section 1001, makes 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.

*See Instruction on Reverse Side