

UNIT STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
NM OIL CONS. COMMISSION  
SUBMIT IN TRIPlicate  
Artesia, N.M. 88210

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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—" for such proposals.)

RECEIVED

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR  
Marbob Energy Corporation ✓

3. ADDRESS OF OPERATOR  
P.O. Drawer 217, Artesia, New Mexico 88211-0210 O. C. D.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface  
1870 FSL 2615 FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3617.9' GR

5. LEASE DESIGNATION AND SERIAL NO.  
LC-028731(B)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
M. Dodd "B"

9. WELL NO.  
66

10. FIELD AND POOL, OR WILDCAT  
Grbg Jackson SR Q Grbg SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 14-T17S-R29E

12. COUNTY OR PARISH  
Eddy

13. STATE  
N.M.

18. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐  
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐  
SHOOT OR ACIDIZE ☐ ABANDON\* ☐  
REPAIR WELL ☐ CHANGE PLANS ☐  
(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐  
FRACTURE TREATMENT ☐ ALTERING CASING ☐  
SHOOTING OR ACIDIZING ☐ ABANDONMENT\* ☒  
(Other) TD, cmt csg

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

17. 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.) \*

TD 4556' 11/11/89; ran 109 jts. 5 1/2" OD 17# csg to 4523',  
cmt w/1440 sx Class C, circ 175 sx, plug down @ 9:15 a.m.  
11/12/89. WOC 18 hrs., tstd csg to 1500# f/30 minutes--held  
okay

Aden

NOV 15 10 40 AM '89

RECEIVED

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

SIGNED Phonda Nelson TITLE Production Clerk DATE 11/14/89

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side