

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.
NM-101079

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

ZARAFA "FF" FEDERAL #1

9. API Well No.

30-015-30900

10. Field and Pool, or Exploratory Area

CEMETARY;MORROW, SOUTHEAST

11. County or Parish, State

EDDY CO., NM

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

Oil ☐ Gas ☒
Well ☒ Well ☐ Other ☐

2. Name of Operator

MARBOB ENERGY CORPORATION

3. Address and Telephone No.

PO BOX 227, ARTESIA, NM 88210 505-748-3303

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980 FSL 660 FEL SEC 12-T21S-R24E, UNIT I

RECEIVED
OCD - ARTESIA

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent

Subsequent Report

Final Abandonment Notice

TYPE OF ACTION

Abandonment

Recompletion

Plugging Back

Casing Repair

Altering Casing

☒ Other PRODUCED WATER DISPOSAL

Change of Plans

New Construction

Non-Routine Fracturing

Water Shut-Off

Conversion to Injection

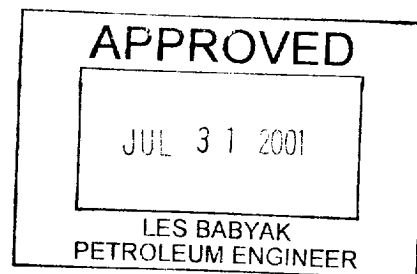
Dispose Water

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

13. 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.)

WE ARE REQUESTING APPROVAL FOR THE PRODUCED WATER FROM THIS WELL TO BE STORED IN A 500 BBL FIBERGLASS TANK AND THEN TRUCKED BY OK HOT OIL SERVICE FOR DISPOSAL INTO THE AID STATE SWD WELL (SEC. 14-T17S-R28E) OPERATED BY OK HOT OIL SERVICE.

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**



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

Signed

Title

PRODUCTION ANALYST

Date 07/18/01

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: