APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

## RECEIVED

0-025-11852

BIM - CARLSBAD Form Approved. Dec. 1973 Budget Bureau No. 42-R1424 UNITED STATES 5. LEASE 8 59 AM DEPARTMENT OF THE INTERIOR Sholes "B" LC.O. GEOLOGICAL SURVEY CARL 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 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 Form 9–331–C for such proposals.)  $\frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \left( \frac{1}{2} \int_{-\infty}^{\infty}$ 8. FARM OR LEASE NAME well well other WELL NO. 2. NAME OF OPERATOR Maralo, Inc. 10. FIELD OR WILDCAT NAME 3. ADDRESS OF OPERATOR Jalmat Tansill Yates 7 Rivers P. O. Box 832, Midland, Texas 79702 0832 11. SEC., T., R., M., OR BLK. AND SURVEY OR 4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17 Unit D E: 560' FNL & 330' FWL T-25-S, AT SURFACE: 12. COUNTY OR PARISH AT TOP PROD. INTERVAL:560' FNI, & 330'FWL Lea AT TOTAL DEPTH: 560' FNL & 330' FWL 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone PULL OR ALTER CASING change on Form 9-330.) MULTIPLE COMPLETE CHANGE ZONES ABANDON\* (other) 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.)\* 1. Set CIBP w/35' cmt plug @ 3000'. 2. Load hole with 10#/gal mud-laden fluid using 25# gel/bbl. 3. Set 100' (15 sx) plug across top of Yates from 2765' to 2865'. 4. Pull 7" csg. Set 100' plug across stub. TAG PLUG. 5. Set 100' (15 sx) cement plug across 10 3/4" surface casing shoe from 375' to 475'. 6. Using 25 sacks cement, set surface plug. [25 SACKs] 7. Remove wellhead, cut off casing & weld plate on casing. 8. Clean up location. 9. Place a metal dry hole marker at location signifying operator's name, well location (section, township and range) and well footage from section boundary. Well has depleted and is no longer capable of producing oil. Subsurface Safety Valve: Manu. and Type \_\_\_ 18. I hereby certify that the foregoing is true and correct Agent 10-4-91 LYXY TITLE DATE (This space for Federal or State office use)

\_\_\_ TITLE \_

MOTIFY BLM AT (505) 393-3612 PRIOR TO AMY

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