

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

APR 15 1999

OPERATOR'S COPY

FORM APPROVED
OMB No. 1004-0135
Expires July 31, 1996

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other Instructions on reverse side

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
 MARBOB ENERGY CORPORATION

3a. Address
 P.O. BOX 227, ARTESIA, NM 88210

3b. Phone No. (include area code)
 505-748-3303

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
 25 FNL 2450 FEL, SEC. 30-T17S-R30E UNIT B

5. Lease Serial No.
 LC-028793C

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
 BURCH KEELY UNIT

8. Well Name and No.
 BURCH KEELY UNIT #291

9. API Well No.
 30-015-30492

10. Field and Pool, or Exploratory Area
 GRBG JACKSON SR O GRBG SA

11. County or Parish, State
 EDDY CO., NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>SPUD, CMT CSG</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

SPUD WELL @ 8:00 A.M. 3/29/99. DRLD 12 1/4" HOLE TO 435', RAN 10 JTS 8 5/8" 24# CSG TO 430', CMTD W/400 SX CLASS C, PLUG DOWN @ 5:45 P.M., CIRC 90 SX TO SURF. WOC 18 HRS, TOOK OPTION 2 PER TEST DATED 8/20/96.

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

Name (Printed/Typed)
 ROBIN COCKRUM

Title
 PRODUCTION ANALYST

Signature

Robin Cockrum

Date
 3/30/99

ACCEPTED FOR RECORD THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by *Wanda P. Glass* Title _____ Date _____

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office _____

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

FOR APPROVED
OMB NO. 1004-0137
Expires: December 31, 1991

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1. TYPE OF WELL: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> Other _____		5. LEASE DESIGNATION AND SERIAL NO. LC-028793C	
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. REKV. <input type="checkbox"/> Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR MARBOB ENERGY CORPORATION		7. UNIT AGREEMENT NAME BURCH KEELY UNIT	
3. ADDRESS AND TELEPHONE NO. P.O. BOX 227, ARTESIA, NM 88210 505-748-3303		8. FARM OR LEASE NAME, WELL NO. BURCH KEELY UNIT #291	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 25 FNL 2450 FEL At top prod. interval reported below SAME At total depth		9. API WELL NO. 30-015-30492	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 3/29/99		16. DATE T.D. REACHED 4/8/99	
17. DATE COMPL. (Ready to prod.) 4/15/99		18. ELEVATIONS (DF. RKB. RT. OR, ETC.)* 3616' GR	
19. ELEV. CASINGHEAD		12. COUNTY OR PARISH EDDY	
20. TOTAL DEPTH, MD & TVD 4850'		13. STATE NM	
21. PLUG BACK T.D., MD & TVD 4840'		10. FIELD AND POOL, OR WILDCAT GRBG JACKSON SR Q GRBG SA	
22. IF MULTIPLE COMPL. HOW MANY*		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA SEC. 30-T17S-R30E	
23. INTERVALS DRILLED BY → 0-4850'		25. WAS DIRECTIONAL SURVEY MADE NO	
24. PRODUCING INTERVAL(S). OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4512-4753' SAN ANDRES		27. WAS WELL CORED	
26. TYPE ELECTRIC AND OTHER LOGS RUN LML, SDSN			

CASING RECORD (Report all strings set in well)

CASING SIZE/GRADE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT. CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24#	430'	12 1/4"	400 SX	CIRC 90 SX
5 1/2"	17#	4850'	7 7/8"	1200 SX	CIRC 125 SX

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8"	4466'	

31. PERFORATION RECORD (Interval, size and number)		32. ACID. SHOT. FRACTURE. CEMENT SQUEEZE, ETC.	
		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4512-4753'	20 SHOTS	4512-4753'	ACD W/2000 GALS 15% NEFE ACID

33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or ^{ABNT-19} PROD)	
4/17/99		PUMPING				PROD	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
4/18/99	24		→	73	87	439	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
		→					

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) SOLD	TEST WITNESSED BY SHANE GRAY
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35. LIST OF ATTACHMENTS
LOGS , DEVIATION SURVEY

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Robin Coakley TITLE PRODUCTION ANALYST DATE 4/19/99

*(See Instructions and Spaces for Additional Data on Reverse Side)

MARBOB ENERGY CORPORATION
BURCH KEELY UNIT #291
25 FNL 2450 FEL, Sec. 30-T17S-R30E
30-015-30492

<u>Working Interest Owner</u>	<u>Percentage Interests</u>
Marbob Energy Corporation P.O. Box 227 Artesia, NM 88210	23.75%
Raye Miller 2308 Sierra Vista Artesia, NM 88210	2.50%
Dastarac, Inc. 26819 S. Via Desmonde Lomita, CA 90717-3679	2.50%
Pitch Energy Corporation P.O. Box 304 Artesia, NM 88210	71.25%
	<hr/> 100.00%