Form 3160-5 (August 1999)

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

FORM OMB N Expires No. 5. Lease Serial No. FORM APPROVED OMB No. 1004-0135 Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to legenter and abandoned well. Use Form 3160-3 (APD) for such proposals RECEIVED ART					+1	LC028784 If Indian, All	B ottee or Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on referse side 1. Type of Well The car well Described to the control of the contr						7. If Unit or CA/Agreement, Name and/or No. NMNM88525X		
1. Type of Weil			- CESS	212026	***	11100JZJA		
🕅 Oil Well 🔲 Gas Well 🔲 Other						8. Well Name and No.		
2. Name of Operator MARBOB ENERGY CORPORATION						BURCH KEELY UNIT #349 9. API Well No.		
3a. Address 3b. Phone No. (include area code)						-015 -327	・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・	
P O BOX 227, ARTESIA, NM 88211-0227 505-748-3303						10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)						GRBG JACKSON SR Q GRBG SA		
2615 FSL 1650 FWL, SEC. 18-T17S-R30E NESW, LOT K						11. County or Parish, State EDDY COUNTY, NM		
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RI								
				OF ACTIO				
TYPE OF SUBMISSION								
Ch. Marine of towns	Acidize	□ Deepen □ Deepen	<u> </u>		on (Start/Resu		Water Shut-Off	
Notice of Intent	☐ Alter Casing ☐ Casing Repair	☐ New Cons		Reclama Recomp		8 0	Well Integrity	
Subsequent Report	Change Plans	Plug and		•	nily Abandon	_	Other TD CSG/CMT	
Final Abandonment Notice	Convert to Injection	Plug Back			•	•		
testing has been completed. Finderermined that the site is ready of the state of th	ON 8/31/03, DRLD 7 DS.27', CMTD 1ST S' 2ND STG W/640 SX 1	7/8" HOL IG W/340 H/L, TAIL	E TO 470 SX SUPER ED IN W/	5', RA H, PD 520 SX	N 111 JT @2:30 P SUPER H	S (4691 M ON 9/(PD 09:	.521) 5 1/2" 01/03, CIRC	
14. I hereby certify that the foregoing	is true and correct	· · · · · · · · · · · · · · · · · · ·						
Name (Printed/Typed)		Ì	Setal					
DEBORA L. WILBOURN			Title GEOTI	ЕСН				
Signature Deliais	8. Elelhourn		Date 09/02					
	THIS SPACE FO	OR FEDERA	L OR STAT	E OFFIC	E USE		A STATE OF THE STA	
Approved by	~~.		Title			Date		
Conditions of approval, if any, are at certify that the applicant holds legal which would entitle the applicant to co	or equitable title to those rights							