

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐		5. LEASE DESIGNATION AND SERIAL NO. LC-028731 (A)	
2. NAME OF OPERATOR Marbob Energy Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Drawer 217, Artesia, N.M. 88210		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 330 FSL 330 FWL		8. FARM OR LEASE NAME M. Dodd "A"	
14. PERMIT NO.		9. WELL NO. 35	
15. ELEVATIONS (Show whether W, W, or, etc.) 3623.5' GR		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson	
		11. SEC. 14-T17S-R29E	
		12. COUNTY OR PARISH Eddy	
		13. STATE N.M.	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERNING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) TD, Cmt. csg.	(Other) ☒
(Other) ☐		(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 data, 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.)

9/8/84 TD 3463'. Ran 84 jts. 5 1/2" 15.50# new casing to 3463', cemented w/1100 sax Halliburton Lite and 400 sax Class C. Plug down 12:00 p.m. 9/8/84, circulated 120 sax. WOC 18 hours, tested casing to 1500# f/30 minutes-held okay. WOCU.

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

SIGNED Carol Purcell TITLE Production Clerk DATE 9/10/84

ACCEPTED FOR RECORD

(This space for Federal or State office use)

APPROVED BY LWQ TITLE _____ DATE _____

CONDITIONS OF APPROVAL SEP 12 1984

Carlsbad, NEW MEXICO *See Instructions on Reverse Side

