Oil Cons. orm 3160-5 August 1999) N.M. DIV-Dist. 2 1301 W. Grand Avenue **UNITED STATES** FORM APPROVED OMB No. 1004-0135 DEPARTMENT OF THE INTERIOR Artesia. NM 88210 Expires November 30, 2000 **BUREAU OF LAND MANAGEMENT** Lease Serial No. RECEIVED SUNDAY NOTICES AND REPORTS ON WELLS NMLC028784C OCD - Appropriate well. Use Form 3160-3 (APD) for such proposals. 6. If Indian, Allottee or Tribe Name IN TRIPLICATE - Other instructions on reverse side 7. If Unit or CA/Agreement, Name and/or No. 55120291 Type of Well <u>NMNM88525X</u> Well Name and No. [2] Oil Well Gas Well Gother Name of Operator BURCH KEELY UNIT #925 MARBOB ENERGY CORPORATION 9. API Well No. 3b. Phone No. (include area code) 3a. Address 30-015-32714 10. Field and Pool, or Exploratory Area PO BOX 227, ARTESIA, NM 88211-0227 (505) 748-3303 Location of Well (Footage, Sec., T., R., M., or Survey Description) GRBG JACKSON SR Q GRBG SA 11. County or Parish, State SEC. 26-T17S-R29E, 635 FNL 1980 FWL, UNIT C EDDY COUNTY, NM 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF ACTION TYPE OF SUBMISSION ☐ Acidize ☐ Deepen Production (Start/Resume) Water Shut-Off ☐ Notice of Intent Alter Casing ☐ Fracture Treat Well Integrity Reclamation Casing Repair New Construction Recomplete Other NAME CHANGE Subsequent Report Change Plans Plug and Abandon Temporarily Abandon Final Abandonment Notice Convert to Injection Plug Back Water Disposal 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.) CHANGE THE NAME OF THIS WELL BURCH KEELY UNIT #925 FROM: TO: BURCH KEELY UNIT #348

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

DIANA J. CANNON

Title PRODUCTION ANALYST

Date JULY 1, 2003

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (ORIG. SGD.) ALEXIS C. SWCBODA

TIREETROLEUM ENGINE 5016

JUL 0 2 2007

Approved by

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