Form 9-331 Dec. 1973 NM OII, Drawer L Artosia	TITS. COMMISSION D Form Approved. Budget Bureau No. 42-R1424 NM 83210 5. LEASE
DEPARTMENT OF THE INTERI	
GEOLOGICAL SURVEYRE	<b>6.</b> IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS	ON 9 WHL'83 7. UNIT AGREEMENT NAME
	B back to a different B. FARM OR LEASE NAME JM Federal
1. oil gas other	-9 1987 1
2. NAME OF OPERATOR Marbob Energy Corporation	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR O.	C. D. Wildcat - 10
P.O. Dr. 217, Artesia, N.M. ARTES	ALOFFICE 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
<ol> <li>LOCATION OF WELL (REPORT LOCATION CLEA below.)</li> </ol>	RLY. See space 17 Sec. 23-155-28E
AT SURFACE: 660 FSL 660 FWL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: SAMe	Chaves N.M.
AT TOTAL DEPTH: Same	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NA REPORT, OR OTHER DATA	URE OF NOTICE, 15. ELEVATIONS (SHOW OF, KDB, AND WD) 3619' GR
REQUEST FOR APPROVAL TO: SUBSEQUEN	
TEST WATER SHUT-OFF	(NOTE: Report results of multiple completion or zone change on Form 9-330.)
TT OFFORING PROPOSED OF COMPLETED OPERA	TIONS (Clearly state all pertinent details, and give pertinent dates, ed work. If well is directionally drilled, give subsurface locations and s and zones pertinent to this work.)*

6/27/83 Ran tubing to 2650', circulated hole w/salt water mud, mixed 25 sax Class H w/3% CC, displaced w/mud, WOC 2 hours, tagged plug @ 2350'; shot off casing @ 1350', pulled casing, ran tubing in hole to 1400', circulated hole w/mud, mixed 35 sax, displaced w/mud, WOC 2 hours; tagged plug @ 1250'; Pumped 30 sax @ 500', displaced w/mud; pumped 30 sax @ 250'; pumped cement @ surface 60'. Some surface equipment remains on location and dry hole marker has not been installed. As soon as this is done, we will notify you that location is ready for inspection. Post ID-2

1-4-83 94A Et. Set av araly Chies mue Production Clerk Date 7/26/83 (This space for Federal or State office use) APPROVED DATE PETER W. CHESTER

JAN 30 1987

BUREAU OF LAND MANAGEMENT

ROSWELL RESOURCE AREA

APPROVED BY CONDITIONS OF AFPROVAL, IF ANT

SIGNED

Subsurface Safety Valve: Manu. and Type

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

\*See Instructions on Reverse Side

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