

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	RECEIVED BY JUL 30 1984 O. C. D. ARTESIA, OFFICE	5. LEASE DESIGNATION AND SERIAL NO. NM 025527-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 1534 FNL 1580 FEL		8. FARM OR LEASE NAME Berry A
		9. WELL NO. 6
		10. FIELD AND POOL, OR WILDCAT Empire Yates SR
		11. SEC., T., R., M., OR BLK. AND SUBVY OR AREA Sec. 24-T17S-R27E
14. PERMIT NO.	15. ELEVATIONS (Show whether of, to, or, etc.)	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	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	(Other) <u>Change of operator</u>	<input checked="" type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		
CHANGE PLANS	<input type="checkbox"/>		

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, 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.)*

This is to change operator from Latch Operations, P.O. Box 10108, Lubbock, Texas 79408, to Marbob Energy Corporation, effective 7/1/84.

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

SIGNED Carol Ann TITLE Production Clerk DATE 7/2/84

(This space for Federal or State office use)

APPROVED BY SWC TITLE _____ DATE _____

CONDITIONS OF APPROVAL IF ANY:

JUL 26 1984

*See Instructions on Reverse Side