

November 1981
Formerly 9-3-11

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPE
(Other Instructions
Vide Side)

TE-11

EXPLORE AUGUST 31, 1988

5. LEASE DESIGNATION AND SERIAL NO.

LC-048491-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME C/SF

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.)

AUG 7 10 42 AM '87

CARLSBAD REGIONAL
AREA HEADQUARTERS

OIL WELL ☐ GAS WELL ☐ OTHER ☒ WIW

2. NAME OF OPERATOR

Marbob Energy Corporation

3. ADDRESS OF OPERATOR

P.O. Drawer 217, Artesia, New Mexico 88211-0217

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

330 FNL 1980 FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

RECEIVED BY

AUG 13 1987

O. C. D.
ARTESIA OFFICE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Saunders A

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Empire Yates SR

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 13-T17S-R27E

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:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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☐
☐

REPAIRING WELL

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FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(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 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.)*

Repaired well as follows:

7/15/87 RU pulled tubing, RIH w/ new 2 3/8" plastic coated tubing & packer, set @ 326.39, circ chemical & pressure tested casing hole @ 25'. POH w/tubing & packer.

7/16/87 RIH w/scrapper to 418', POH w/scrapper. RIH w/CIBP & 2 7/8" tubing & set @ 393'-7" CIBP. POH w/ 2 7/8" tubing, RIH w/4 1/2" 9.5# casing to 393'. Cemt w/100 sx Class C cemt, circ 50 sx, SD.

7/17/87 SD

7/18/87 RIH w/10 collars, tag cemt, DO cemt & CIPB. RIH to TD, circ hole, POH. RIH w/scrapper to 390'. POH, SD.

7/20/87 RIH w/packer, set @ 293.80, circ chem, tst casing to 500#--held, put back on injection.

I hereby certify that the foregoing is true and correct

SIGNED

Phonda Nelson

TITLE

Production Clerk

DATE

8/6/87

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

DATE

SJS

AUG 10 1987

*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO

November 1984
Formerly 9-341

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN THE
(Other, instruct,
verre side)

EXPIRES AUGUST 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-048491-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON RECEIVED BY

(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 ☒ WIW

2. NAME OF OPERATOR

Marbob Energy Corporation ✓

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See also space 17 below.)

At surface

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N.M.

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NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

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REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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REPAIRING WELL

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FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

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We propose to repair well as follows:

Run 4½" csg. to 395', circ cement to surf, clean out to TD. Run new plastic coated tubing to 300' w/pkr on tbg, circ chem on backside. Set pkr and test csg. to 500#. Put well back on injection.

Subject to
Like Approval
by State

RECEIVED
JUL 27 8 19 AM '87
CARLSBAD RESOURCE
AREA HEADQUARTERS

I hereby certify that the foregoing is true and correct

SIGNED

Phonda Nelson

TITLE

Production Clerk

DATE

7/24/87

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

7-31-87

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

