

Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ well ☒ gas well ☐ other ☐

2. NAME OF OPERATOR

Marbob Energy Corporation

3. ADDRESS OF OPERATOR

P.O. Dr. 217, Artesia, N.M. 88210

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: *660 FNL 1980 FEL*

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH: *Same*

Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) *Change of operator*

☐

☐

☐

☐

☐

☐

☐

☐

☒

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.)*

Effective 10/1/82 we took over as operator. Former operator was Sun Exploration & Production Co., P.O. Box 1861, Midland, Texas 79702.

5. LEASE

LC-028731-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

M. Dodd "B"

9. WELL NO.

16

10. FIELD OR WILDCAT NAME

Grbg Jackson On SA Office

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

15- 17S-29E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED *Carol Davis* TITLE *Production Clerk* DATE *10/29/82*

APPROVED

(This space for Federal or State office use)

(Orig. Sgd.) PETER W. CHESTER
CONDITIONS OF APPROVAL, IF ANY:

NOV 9 1982

FOR

JAMES A. GILLHAM
DISTRICT SUPERVISOR

See Instructions on Reverse Side