

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN 1 APPLICATION
NW OIL (Other instructions on back)
Drawer 10

c/SF
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 ☐ GAS WELL ☐ OTHER <u>Injection</u>		RECEIVED BY OCT 03 1984 O. C. D. ARTESIA, OFFICE	5. LEASE DESIGNATION AND SERIAL NO. <u>LC-028731 (B)</u>
2. NAME OF OPERATOR <u>Marbob Energy Corporation</u> ✓			6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <u>P.O. Drawer 217, Artesia, N.M. 88210</u>			7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) <u>At surface</u> <u>660 FNL 1980 FEL</u>			8. NAME OF LEASE NAME <u>M. Dodd "B"</u>
14. PERMIT NO.		15. ELEVATIONS (Show whether HP, ST, GR, etc.) <u>3587' GR</u>	9. WELL NO. <u>16</u>
			10. FIELD AND POOL, OR WILDCAT <u>Grayburg Jackson</u>
			11. SEC. 15-T17S-R29E
			12. COUNTY OR PARISH <u>Eddy</u>
			13. STATE <u>N.M.</u>

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Return to injection

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

X
X

(Note: Report results of multiple completion on Well Completion or Recombination 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.)

We pulled tubing & packer, cleaned well out to TD, ran new tubing & packer, circulated hole w/corrosion inhibitor, set packer @ 2350', tested casing to 500#, held okay, acidized perfs, put well on active injection.

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

SIGNED

C. J. Purcella

TITLE

Production Clerk

DATE

9/27/84

(This space for Federal or State office use)

APPROVED BY

[Signature]

TITLE

DATE

CONDITIONS OF APPROVAL 9/27/84

C. J. Purcella

NEW MEXICO

*See Instructions on Reverse Side