

NM OIL CONS. COMMISSION
Drawer DD
Artesia, NM 88210

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. Drawer 217, Artesia, N.M. 88210
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: *1980 FSL 1980 FEL*
AT TOP PROD. INTERVAL: *Same*
AT TOTAL DEPTH: *Same*
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

(other) *Change of operator*

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐

X

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.

22

O. C. D.

ARTESIA OFFICE

10. FIELD OR WILDCAT NAME

Grayburg Jackson Qn SA

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

14-17S-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.)

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.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED

TITLE

Production Clerk

DATE *10/29/82*

(Orig. Sgd.)

PETER W. GILLHAM

(THIS SPACE FOR FEDERAL OR STATE OFFICE USE)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NOV 9 1982

FOR

JAMES A. GILLHAM

DISTRICT SUPERVISOR *See Instructions on Reverse Side