Form 9–331
Dec. 1973

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42–R1424

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.)

NOV 4 1982

1. oil well XX   gas well ☐   other

2. NAME OF OPERATOR
   Marbob Energy Corporation OIL & GAS GEOLOGICAL SURVEY ROSWELL, NEW MEXICO

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 FNL 1980 FEL*
   AT TOP PROD. INTERVAL: *Same*
   AT TOTAL DEPTH: *Same*

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

5. LEASE
   LC-028731-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME RECEIVED

8. FARM OR LEASE NAME
   M. Dodd "B"   NOV 10 1982

9. WELL NO.
   24   O. C. D.

10. FIELD OR WILDCAT NAME ARTESIA, OFFICE
    Grayburg Jackson Qn SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
    14-17S-29E

12. COUNTY OR PARISH   13. STATE
    Eddy   *N.M.*

14. API NO.

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

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

	REQUEST	SUBSEQUENT
TEST WATER SHUT-OFF	☐	☐
FRACTURE TREAT	☐	☐
SHOOT OR ACIDIZE	☐	☐
REPAIR WELL	☐	☐
PULL OR ALTER CASING	☐	☐
MULTIPLE COMPLETE	☐	☐
CHANGE ZONES	☐	☐
ABANDON*	☐	☐
(other) *Change of operator*		X

(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*

APPROVED

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) PETER W. CHESTER

CONDITIONS OF APPROVAL IF ANY:
NOV 9 1982

FOR
JAMES A. GILLHAM
DISTRICT SUPERVISOR

TITLE _____   DATE _____

See Instructions on Reverse Side