Form 9-331 Dec. 1973

IM OIT, COMS. COMMISSION

68210

Form Approved Budget Bureau No. 42-R1424

UNITED STATES WOLL DO DEPARTMENT OF THE INTERIOR CEOLOGICAL SLIBVEY

5. LEASE

LC 028731 (A)

RECEIVED 6. IF INDIAN, ALLOTTEE OR TRIBE NAME

GEOLOGICAL SURVEY	
SUNDRY NOTICES AND REPORTS ON WELLS 32	
	RICH. Dodd "A"
 oil well well other NAME OF OPERATOR Marbob Energy Corporation ADDRESS OF OPERATOR P.O. Drawer 217, Artesia, N.M. 88210 LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 2310 FSL 2310 FEL AT TOP PROD. INTERVAL: 	9. WELL NO. 24 ARTEGIA, OFFICE 10. FIELD OR WILDCAT NAME Grayburg Jackson SF 2666 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22-T175-R29E 12. COUNTY OR PARISH Eddy N.M.
AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	14. API NO. 30-015-24533 15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: SEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) Spud, cement	3547.61 GR (NO1E: 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.)*

Spudded well 8:00 a.m. 8/2/83, drilled 12%" hole to 350', ran 8 jts. 8 5/8" 24# new casing to 342', cemented w/225 sax Class C, 2% CC, plug down @ 5:00 p.m. 8/2/83, circulated 50 sax. WOC 18 hours. Tested casing to 650# f/30 minutes - held okay. Reduced hole to 7 7/8" and resumed drilling.

Subsurface Safety Valve: Manu. and Ty	ρe
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Set w

Ft.

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

THILE Production Clerk DATE

8/3/83

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY TITLE

ACCEPTED FOR RECORD

*See Instructions on Reverse Side