SUNDRY NOTICES AND REPORTS ON WELLS  (Do not use this form for proposals to drill or to deepen or play back to a Meanat resource of the "APPLICATION FOR PERMIT—" for such property (VL) BY  1. OIL WELL WELL OTHER  2. NAME OF OPERATOR Marbob Energy Corporation  3. ADDRESS OF OPERATOR M. Dodd "B"  3. ADDRESS OF OPERATOR P.O. Drawer 217, Artesia, N.M. 8821 ARTESIA, OFFICE  4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  At surface  1650 FSL 1650 FWL  16. ELEVATIONS (Show whether M. R.F. C. etc.)  17. UNIT ADRESSMENT NAME  7. UNIT ADRESSMENT NAME  8. PARK OR LEASE NAME  M. Dodd "B"  9. WELL NO.  40  10. PIELD AND POOL, OR WILDCA  **Indian Gray burg Jackson  11. ENG., T. R. M. OF ELE. AND  FORVET OR ADRESS OF ELE. AND  Sec. 14-T175-R291  14. PERMIT NO.  15. ELEVATIONS (Show whether M. RF. C. etc.)  16. DESCRIPT OR PARKER 13. EVEN	Form 3160-5 WM OIL COME.	COLUMNIED STATES	S SUBMIT IN TRIPLICAL	Form approved.  Budget Bureau No. 1004-013 Expires August 31, 1985
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WALL (M) WALL OFFICE    PART OF POPERTOR   Marbob Energy Corporation	I. OFF. CO. GAR. CO.		N V V V V V V V V V V V V V V V V V V V	7. UNIT AGREEMENT NAME
Marbob Energy Corporation  A Assessed or oreascent P.O. Drawer 217, Artesia, N.M. 88210  ARIESIA, CHRICE 40  10. Praker 217, Artesia, N.M. 88210  ARIESIA, CHRICE 40  10. Praker 217, Artesia, N.M. 88210  ARIESIA, CHRICE 40  10. Prake 217, Artesia, N.M. 88210  ARIESIA, CHRICE 40  10. Prake 217  ARIESIA, CHRICE 40  10. Prake 217  ARIESIA, CHRICE 40  10. Prake 217  ARIESIA, CHRICE 40  11. Maryarone (Rhow whether st. M. et al.)  11. Maryarone (Rhow whether st. M. et al.)  12. Maryarone (Rhow whether st. M. et al.)  13. Maryarone (Rhow whether st. M. et al.)  13. Maryarone (Rhow whether st. M. et al.)  14. PRIMITY NO.  15. Maryarone (Rhow whether st. M. et al.)  16. Check Appropriete Box To Indicate Noture of Notice, Report, or Other Data  17. Maryarone Suprement Supremen	WELL Y WELL OTH	BR	JUN-0-8-1984	B PARM OR I GARD WAVE
P.O. Drawer 217, Artesia, N.M. 88210  ARESIA, CFICE  4. Accession of villa (Report location clearly and in accordance with any State requirements.*  1. 10. Frate and Pools, on Wilson Att enrifeer  1. 10. Frate and Pools, on Wilson Att enrifeer  1. 10. Frate and Pools, on Wilson Att enrifeer  1. 10. Frate and Pools, on Wilson Att enrifeer  1. 10. Frate and Pools, on Wilson Att enrifeer  1. 10. Frate and Pools, on Wilson Att enrifeer  1. 11. Compart on Planta Bill Fool And All And Control of Indicate Notice, Report, or Other Data  1. 11. Compart on Planta Bill Fool And And And Control of Indicate Notice, Report, or Other Data  1. 12. Compart on Planta Bill Fool And And Control of Indicate Notice, Report, or Other Data  1. 12. Compart on Planta Bill Fool And And And Control of Indicate Notice, Report, or Other Data  1. 12. Compart on Planta Bill Fool And And Bill Fool And And Bill Fool And And Bill Fool And And Bill Fool		oration		
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At suffice  1650 FSL 1650 FWL  11. SLAVATIONS (Elbow whether by St. Gs. ds.)  Sec. 14-T175-R29;  12. COMPATY OF PARTIES IN TO PARTIES IN THE PRODUCTION OF COMPATY OF PARTIES IN THE PROTUCT OF INTERFERS TO COMPATY OF STATES AND COMPATY OF STAT				40
16. Clack Appropriate Box To Indicate Notice, Report, or Other Data  NOTICE OF INTENTION TO:  THAT WATER SERVICES OF INTENTION TO:  THAT SERVICES OF INTENTION TO:	See also space 17 below.)	tion clearly and in accordance	with any State requirements.*	10. FIELD AND POOL, OR WILDCAT
14. PREMITY NO.   15. RESTATIONS (Show whether Mr. St. en. cla.)   15. COUNTY OF PARISH   16. Sec. 14-7175-R29.  16.   Check Appropriate Box To Indicate Notice, Report, or Other Data ROTICE OF INTERPRET OF PARISH   16. STARROGER TRADEGER TRADEGER TO PARISH   16. STARROGER TRADEGER TRADEGER TRADEGER TRADEGER TRADEGER OF PELL OR ALTER CARING NOTICE TRADEGER TRADE		650 FWT		flud Grayburg Jackson & R
18. MENTON:  18. MENTON:  19. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Date  NOTICE OF INTENTION TO:  TEST WATER SENT-OFF PRACTURE TREAT ROOT OR ACIDIES ARABOON* CHANGE PLANS CHANGE PLA	1050 FSL 1	OSU FWL		
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Check Appropriate Box To Indicate Noture of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SEUT-OFF PRACTURE TREAT SHOOT OR ACIDIER SHOOT O	14. PRRMIT NO.	15. BLEVATIONS (Show w		12. COUNTY OR PARISH 18. STATE
NOTICE OF INTENTION TO:  THEST WATER SEUT-OFF PRACTURE TREAT ARANDON' SEPARATE CARRIES ARANDON' SEPARATE CARRIES CHAMP FLAM  (Other)  7. DESCRIPTION OR ACTORISE OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including entimated date of start properties to this work, be well in directionally dribed, give subsenties lossitions and measured and true vertical depths for all markers and some sense of the completion of the			<del></del>	
TEST WATER SECT-OFF  PRACTURE TREAT SHOOT OR ACIDIES  REPAIR WELL  CHANGE PLANS  CHANG	6. Check	Appropriate Box To Ind	licate Nature of Notice, Report, o	r Other Data
PRACTURE TREAT SHOOT OR ACIDEE  SEPAIR WELL  (Other)  (Other)  (Other)  (Other)  (Other)  (Nove: Report results of multiple completion on Well Completion or Recompletion on Well Completion or Recompletion on Well Separation on Well of Mell is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and some ment to this work.)  Spudded 10:00 a.m. 6/2/84. Drilled 12‡" hole to 328', ran 328' of 8 5/8" 24# new casing, cemented w/300 sax Class C, 2% CC, plug down @ 2:45 p.m. 6/2/84, circulated 60 sax, ready mixed to surface w/4 yards. WOC 18 hours, tested casing to 500# f/20 minutes-held okay.  State of the foregoing is transmitted and correct production Clerk  Signed Additional Results of the surface w/4 parts.  Production Clerk  DATE 6/4/84  Additional Results of the surface w/4 parts.  DATE 6/4/84	NOTICE OF	: OT MOITHETH		MAGGENT REPORT OF:
BROOT OR ACTIDIES  REPAIR WELL  (Other)  CHANGE PLANS  (Other)  CHANGE PLANS  (Other)  COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, lacitioning estimated date of each proposed work. If well is directionally drilled, give subsurface lossitions and measured and true vertical depths for all markers and some nent to take work.)  Spudded 10:00 a.m. 6/2/84. Drilled 12½" hole to 328', ran 328' of 8 5/8"  24# new casing, cemented w/300 sax Class C, 2% CC, plug down @ 2:45 p.m.  6/2/84, circulated 60 sax, ready mixed to surface w/4 yards. WOC 18 hours, tested casing to 500# f/20 minutes-held okay.  I hereby cerity hat the toregoing by trop and correct  BIGNED  ALLELY TITLE  Production Clerk  DATE  6/4/84	TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
REPAIR WELL  (Other)  (Other)  (Norm: Report recealing of multiple completion on Well Completion of Recompletion and Log form.)  7. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and some sense to this work.)  Spudded 10:00 a.m. 6/2/84. Drilled 12½" hole to 328', ran 328' of 8 5/8" 24# new casing, cemented w/300 sax Class C, 2% CC, plug down @ 2:45 p.m. 6/2/84, circulated 60 sax, ready mixed to surface w/4 yards. WOC 18 hours, tested casing to 500# f/20 minutes-held okay.  1. hereby ceristy past the foregoing is you and correct  SIGNED AND TITLE Production Clerk  Production Clerk  DATE 6/4/84	FRACTURE TREAT	MULTIPLE COMPLETE	PRACTURE TREATMENT	ALTERING CASING
(Other)  (Norm: Report results of multiple completion on Weal Completion Recompletion Report and Log form.)  7. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and some nearly of the start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and some nearly of the start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and some nearly of the start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and some nearly of the start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and some nearly of the start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and some nearly of the start proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all reported an		[ <del></del>		
7. DESCRIPT PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent actual pertinent and give pertinent date in proposed work.) well is directionally drilled, give subsurface lossilons and measured and true vertical depths for all markers and some sound to this work.)  Spudded 10:00 a.m. 6/2/84. Drilled 12½" hole to 328', ran 328' of 8 5/8"  24# new casing, cemented w/300 sax Class C, 2% CC, plug down @ 2:45 p.m.  6/2/84, circulated 60 sax, ready mixed to surface w/4 yards. WOC 18 hours, tested casing to 500# f/20 minutes-held okay.  I hereby certify part the foregoing in tray and correct  Production Clerk  At All the tray of the foregoing in tray and correct  Production Clerk  DATE 6/4/84		CHANGE PLANS	(Nors: Report ress	lite of multiple completion on Wall
SIGNED A TITLE Production Clerk DATE 6/4/84	24# new casing 6/2/84, circula	, cemented w/300 sated 60 sax, ready	ax Class C, 2% CC, plug o mixed to surface w/4 yan	lown @ 2:45 p.m.
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