

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		RECEIVED BY MAY 9 1984 O. C. D. ARTESIA, OFFICE	5. LEASE DESIGNATION AND SERIAL NO. LC-028731 (B)	
2. NAME OF OPERATOR Marbob Energy Corporation			6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Drawer 217, Artesia, N.M. 88210			7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1345 FSL 2310 FEL			8. FARM OR LEASE NAME M. Dodd "B"	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, HT, GR, etc.) 3612.7' GR		9. WELL NO. 38
				10. FIELD AND POOL, OR WILDCAT Grayburg Jackson
				11. SEC., T., R., M., OR BLM. AND SURVEY OR ADMA Sec. 14-T17S-R29E
				12. COUNTY OR PARISH Eddy
				13. STATE N.M.

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) TD, cement

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

TD 3460'. Ran 3445' of 5 1/2" 15.50# new casing, cemented w/750 sax Halliburton Lite and 550 sax Class C, plug down @ 6:03 p.m., 4/23/84, circulated 75 sax. WOC 18 hours, pressure tested casing to 1500# f/30 minutes-held okay.



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

SIGNED

Carolee Davis

TITLE

Production Clerk

DATE

4/25/84

(This space for Federal or State office use)

APPROVED FOR RECORD

APPROVED BY

[Signature]

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

MAY 8 1984

*See Instructions on Reverse Side

