

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
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.)

SUBMIT IN TV  
(Other Instruc.  
on re-

Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-028731 (B) (6)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

M. Dodd "B"

9. WELL NO.

55

10. FIELD AND POOL, OR WILDCAT

Grbg Jackson SR Q G SA

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

Sec. 11-T17S-R29E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

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 and in accordance with any State requirements.\*  
See also space 17 below.)

At surface

1295 FSL 1980 FWL

14. PERMIT NO.

30-015-25463

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3630.2' GR

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 COMPLETION

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Run, cmt csq.

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.)\*

Spudded 8:00 a.m. 11/17/85. Drilled 12 1/4" hole to 350', ran 9 jts. 10 3/4" 40.00# new casing to 328'; cemented w/350 sax Class C, 2% CC; plug down @ 6:19 p.m. 11/17/85; circulated 60 sax. WOC 18 hours, tested casing to 600# f/20 minutes-held okay.

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

SIGNED

*Carolyn Purcella*

TITLE

Production Clerk

DATE

11/18/85

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*Nov 22 1985*

\*See Instructions on Reverse Side