

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OFFICE FOR THE
OF COPIES REQUIRED
(Other Instructions on re-
verse side)

FOOTPRINT FORM NO.

NM60-3160-4

5. LEASE DESIGNATION AND SERIAL NO.

NM-016786

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Raper Federal

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Square Lake Grbq SA

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

Sec. 11-T17S-R29E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Marbob Energy Corporation

3a. Area Code & Phone No.
(505) RECEIVED

3. ADDRESS OF OPERATOR

P. O. Drawer 217, Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)

At surface

330 FEL 2310 FNL

O. C. D.
ARTESIA, OFFICE

14. PERMIT NO.

30-015-25667

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

3643' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

Perfs

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.)

8/15/90 Pulled rods & tbq, perfed csg 2487-2629', and perfs w/1000 gals. 15% NE ac.

8/16/90 Frac perfs 2487-2629' w/20,000 gals. 40# gel and 130 sx 20/40 sand & 80 sx 12/20 sand.

8/17/90 Put well back on pump.

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

SIGNED

TITLE Production Clerk

DATE 9/14/90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side