

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985  
5. LEASE DESIGNATION AND AERIAL NO.  
LC-049998(A)  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 Application To Drill Well

2. NAME OF OPERATOR Marbob Energy Corporation

3. ADDRESS OF OPERATOR P.O. Drawer 217, Artesia, New Mexico 88211-0217

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface  
330 FNL 1650 FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3749.0' GL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Foster Eddy

9. WELL NO.  
7

10. FIELD AND POOL, OR WILDCAT  
Grbq Jackson SR Q Grbq SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 17-T17S-R31E

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:                      |   | SUBSEQUENT REPORT OF:                          |  |
|--|---|--|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/>        | REPAIRING WELL <input type="checkbox"/>  |
| FRACTURE TREAT <input type="checkbox"/>      | MULTIPLE COMPLETE <input type="checkbox"/>    | FRACTURE TREATMENT <input type="checkbox"/>    | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/>    | ABANDON* <input type="checkbox"/>             | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/>    |
| REPAIR WELL <input type="checkbox"/>         | CHANGE PLANS <input type="checkbox"/>         | (Other) <u>Change in cement program</u>        | <u>XX</u>                                |

(Other) Change in cement program  
(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.)

TO AMEND APPLICATION FOR PERMIT TO DRILL

23. PROPOSED CASING AND CEMENTING PROGRAM

| SIZE OF HOLE | SIZE OF CASING | WEIGHT PER FOOT | SETTING DEPTH | QUANTITY OF CEMENT                 |
|--------------|----------------|-----------------|---------------|------------------------------------|
| 12 1/4"      | 8 5/8"         | 24#             | 450'          | Circulate                          |
| 7 7/8"       | 5 1/2"         | 17#             | 6000'         | Sufficiently attempt to circulate. |

NOTE: On production string, a fluid caliber will be run, will figure cement w/25% excess, attempt to circulate.

RECEIVED  
SEP 25 8 20 AM '89  
CASA  
AREA

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

SIGNED Phonda Nelson TITLE Production Clerk DATE 9/20/89

(This space for Federal or State office use)  
Orig. Signed by Adam Salameh

APPROVED BY \_\_\_\_\_ TITLE PETROLEUM ENGINEER DATE 11-3-89

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side