

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING  
OFFICE FOR NUMBER  
OF COPIES REQUIRED  
(Other instructions on re-  
verse side)

BLM Roswell District  
Modified Form No.  
NM060-3160-4

clsr

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to 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"/>		OCT 15 1991		5. LEASE DESIGNATION AND SERIAL NO. LC-028731 (A)	
2. NAME OF OPERATOR Marbob Energy Corporation		O. C. D. ARTESIA OFFICE		3a. Area Code & Phone No. 505-748-3303	
3. ADDRESS OF OPERATOR P. O. Drawer 217, Artesia, NM 88210				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface  990 FSL 1650 FEL Unit Letter O				7. UNIT AGREEMENT NAME	
14. PERMIT NO. 30-015-26814		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3552.0' GR		8. FARM OR LEASE NAME M. Dodd A Federal	
				9. WELL NO. 45	
				10. FIELD AND POOL, OR WILDCAT Grbg Jackson SR Q Grbg SA	
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22-T17S-R29E	
				12. COUNTY OR PARISH Eddy	
				13. STATE NM	

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)

Spud, cmt csg

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 @ 3:30 p.m. 10/3/91. Drld 17 1/4" hole to 190',  
ran 4 jts. 13 3/8" OD 48# ST&C csg to 180', cmtd w/225  
sx Halliburton Class C w/2% CC, circ 25 sx to surf,  
plug down @ 5:45 p.m. 10/4/91. WOC 18 hrs., tstd csg  
to 600# f/20 minutes--held okay.

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

SIGNED Rhonda Nelson

TITLE Production Clerk

DATE 10/8/91

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

\*See Instructions on Reverse Side