

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION  
Drawer DD  
Artesia, NM 88210

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
Marbob Energy Corporation

3. Address and Telephone No.  
P. O. Drawer 217, Artesia, NM 88210

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
960 FNL 990 FEL, SEC. 24-T17S-R29E, UNIT A

5. Lease Designation and Serial No.  
LC-028784A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

BURCH KEELY UNIT

8. Well Name and No.

BURCH KEELY UNIT #234

9. API Well No.  
30-015-27652

10. Field and Pool, or Exploratory Area

GRBG JACKSON SR Q GRBG SA

11. County or Parish, State

Eddy County, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other TD, CMT CSG  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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 4650' 6/8/94 @ 8:00 p.m. Ran 114 jts. 17# J-55 5 1/2" csg to 4633', cmt'd 1st stage w/300 sx 50/50 Poz plus 3# salt/sx & 5/10 of 1% Halad 322, plug down @ 12:15 p.m. 6/9/94, circ 90 sx, DV tool @ 3258', cmt'd 2nd stage w/300 sx 50/50 Poz plus 5# salt/sx & 5/10 of 1% Halad 322, and 400 sx Prem. Plus plus 6# salt/sx & 1/4# flocele, plug down @ 7:00 p.m. 6/9/94, circ 102 sx. WOC 18 hrs., tstd csg to 1500# f/30 minutes---held okay.

JUN 16 11 45 AM '94  
CARLE AREA

RECEIVED

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

Signed Phonda Nelson Title PRODUCTION CLERK

Date 6/15/94

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date \_\_\_\_\_