

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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 227, Artesia, NM 88210 505-748-3303

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
2310 FSL 1130 FWL SEC. 19-T17S-R30E, UNIT L

5. Lease Designation and Serial No.

LC-028793A

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 #247

9. API Well No.

30-015-28335

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 1)

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 4715' 9/19/95, ran 116 jts. 5 1/2" J-55 17#
csg to 4715', cmted w/325 sx 50/50 Poz plus 1050
sx of Poz & Hall. Lite plus 250 sx 50/50 Poz,
plug down @ 2:00 p.m. 9/20/95, circ 188 sx to
surf.

RECEIVED

SEP 29 1995

OIL CON. DIV.
DIST. 2

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

Signed Rhonda Nelson Title Production Clerk

Date 9/28/95

(This space for Federal or State office use)

Approved by
Conditions of approval, if any:

Title

Date