

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division  
811 S. 1st Street  
Artesia, NM 88210-2834  
FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993  
Lease Designation and Serial No.

**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.

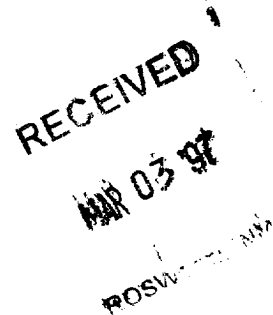
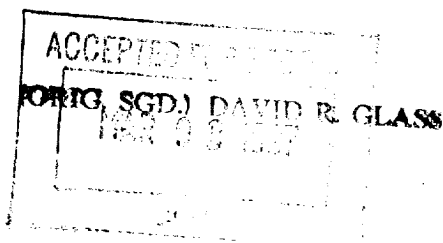
**SUBMIT IN TRIPLICATE**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	MAR 05 1997	7. If Unit or CA, Agreement Designation BURCH KEELY UNIT
2. Name of Operator Marbob Energy Corporation	OIL CON. DIV.	8. Well Name and No. BURCH KEELY UNIT #263
3. Address and Telephone No. P. O. Drawer 227, Artesia, NM 88210	505-748-3303	9. API Well No. 30-015-28336
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 25 FSL 1980 FEL, SEC. 24-T17S-R29E UNIT 0		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	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent <input type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other <u>SPUD, CMT CSG</u>	<input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water

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.)\*

SPUD WELL @ 4:30 P.M. 2/25/97. DRLD 12 1/4" HOLE TO 415', RAN 10 JTS 8 5/8" J-55 24# CSG TO 415', CMTD W/350 SX CLASS C CMT, PLUG DOWN @ 1:15 A.M. 2/26/97, CIRC 25 SX TO SURF. WOC 12 HRS, TOOK OPTION 2 PER TEST DATED 8/20/96.



4. I hereby certify that the foregoing is true and correct.		
Signed <u>Phonda Nelson</u>	Title <u>PRODUCTION CLERK</u>	Date <u>2/28/97</u>
(This space for Federal or State office use)		
Approved by _____	Title _____	Date _____
Conditions of approval, if any:		