

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

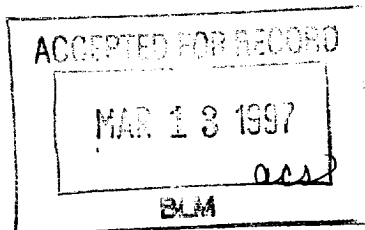
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Designation and Serial No. LC-028784C
2. Name of Operator Marbob Energy Corporation		6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. Drawer 227, Artesia, NM 88210 505-748-3303		7. If Unit or CA, Agreement Designation BURCH KEELY UNIT
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 25 FSL 1980 FEL SEC. 24-T17S-R29E UNIT 0		8. Well Name and No. BURCH KEELY UNIT #263
		9. API Well No. 30-015-28336
		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"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other TD, CMT CSG
	<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.)*

TD WELL @ 9:00 A.M. 3/5/97. DRLD 7 7/8" HOLE TO 4795', RAN 116 JTS 5 1/2" J-55 17# CSG TO 4784', CMTD 1ST STAGE W/300 SX 50/50 POZ, PLUG DOWN @ 9:45 P.M. 3/6/97, CIRC 43 SX TO SURF, CMTD 2ND STAGE W/1000 SX PREM PLUS, PLUG DOWN @ 5:30 A.M. 3/7/97, CIRC 200 SX TO SURF. WOC 18 HRS, TSTD CSG TO 600# FOR 20 MINUTES--HELD OK. DV TOOL @ 3247'.



4. I hereby certify that the foregoing is true and correct.
Signed Chonda Nelson Title PRODUCTION CLERK Date 3/11/97
(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: