

Form 3160-3
(July 1989)
(formerly 9-331C)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

BLM Roswell District
Modified Form No.
ND60-3160-2 30-015-28586

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK
DRILL ☒ DEEPEN ☐ PLUG BACK ☐

b. TYPE OF WELL
OIL WELL ☒ GAS WELL ☐ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐

2. NAME OF OPERATOR
Marbob Energy Corporation 14049

3a. Area Code & Phone No.
505-748-3303

3. ADDRESS OF OPERATOR
P. O. Drawer 217, Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)
At surface
25 FNL 1980 FEL
At proposed prod. zone
SAME Unit B
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
EAST OF ARTESIA ON US 82 APPROX. 21.8 MILES

10. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT.
(Also to nearest drilg. unit line, if any) 25'

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.
635'

19. NO. OF ACRES IN LEASE
480

19. PROPOSED DEPTH
4800'

20. ROTARY OR CABLE TOOLS
ROTARY

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
3578' GR

22. APPROX. DATE WORK WILL START*
AUGUST 1, 1995

5. LEASE DESIGNATION AND SERIAL NO.
LC-028784B

6. IF INDIAN, ALLOTTED OR TRIBE NAME

7. UNIT AGREEMENT NAME
6497
Burch Keely LT

8. NAME OF LESSEE NAME
KEELY B FEDERAL

9. WELL NO.
27 801

10. FIELD AND POOL, OR WILDCAT
GRBG JACKSON SR Q GRBG SA

11. SEC. T. R. M., OR BLK. AND SURVEY OR AREA
SEC. 26-T17S-R29E

12. COUNTY OR PARISH
EDDY

13. STATE
NM

PROPOSED CASING AND CEMENTING PROGRAM

HOLE SIZE	CASING SIZE	WEIGHT/FOOT	GRADE	THREAD TYPE	SETTING DEPTH	QUANTITY OF CEMENT
12 1/4"	8 5/8"	24#	J-55	LT&C	350'	300 sx CIRCULATE
7 7/8"	5 1/2"	17#	J-55	LT&C	4800'	1100 sx (tie back)

Pay zone will be selectively perforated and stimulated as needed for optimum production.

RECEIVED

JUL 17 1995

OIL CON. DIV.
DIST. 2

- Attached are:
1. Location & Dedication Acreage Plat
 2. Supplemental Drilling Data
 3. Surface Use Plan

Post ID-1
7-21-95
New loc & APF

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED Rhonda Nelson TITLE Production Clerk DATE 5/25/95

(This space for Federal or State office use)

PERMIT NO. APPROVAL DATE

APPROVED BY TITLE DATE JUN 1 1995

CONDITIONS OF APPROVAL, IF ANY:

APPROVAL SUBJECT TO
GENERAL REQUIREMENTS AND
SPECIAL STIPULATIONS

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)

25 FNL 1980 FEL, SEC. 26-T17S-R29E, UNIT B

5. Lease Designation and Serial No.

LC-028784B

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 #801

9. API Well No.

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 CHANGE NAME
☐ 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.)*

CHANGE NAME FROM: KEELY B FEDERAL #27

TO: BURCH KEELY UNIT #801

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

Signature

Title PRODUCTION CLERK

Date 6/6/95

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

ACCEPTED

SJS

7

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised February 10, 1994
Instruction on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT IV
PO BOX 2088, SANTA FE, NM 87504-2088

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-015-28580	Pool Code 28509	Pool Name GRBG JACKSON SR Q GRBG SA
Property Code	Property Name KEELY B FEDERAL	Well Number 27
OGRID No. 014049	Operator Name MARBOB ENERGY CORPORATION	Elevation 3578

Surface Location

UL or lot No. B	Section 26	Township 17 S	Range 29 E	Lot Idn	Feet from the 25	North/South line NORTH	Feet from the 1980	East/West line EAST	County EDDY
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Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres 40	Joint or Infill	Consolidation Code	Order No.						

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

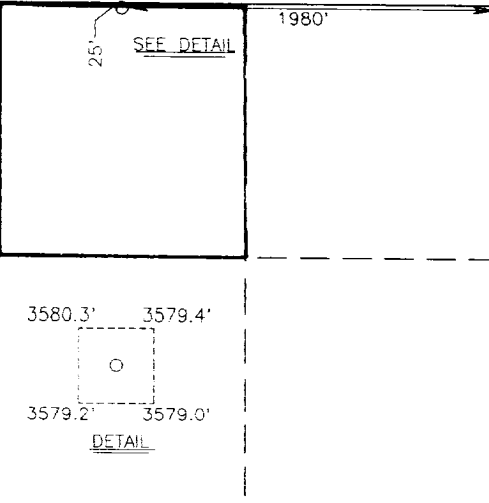
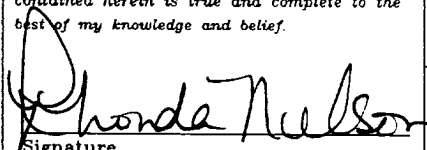
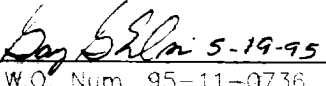
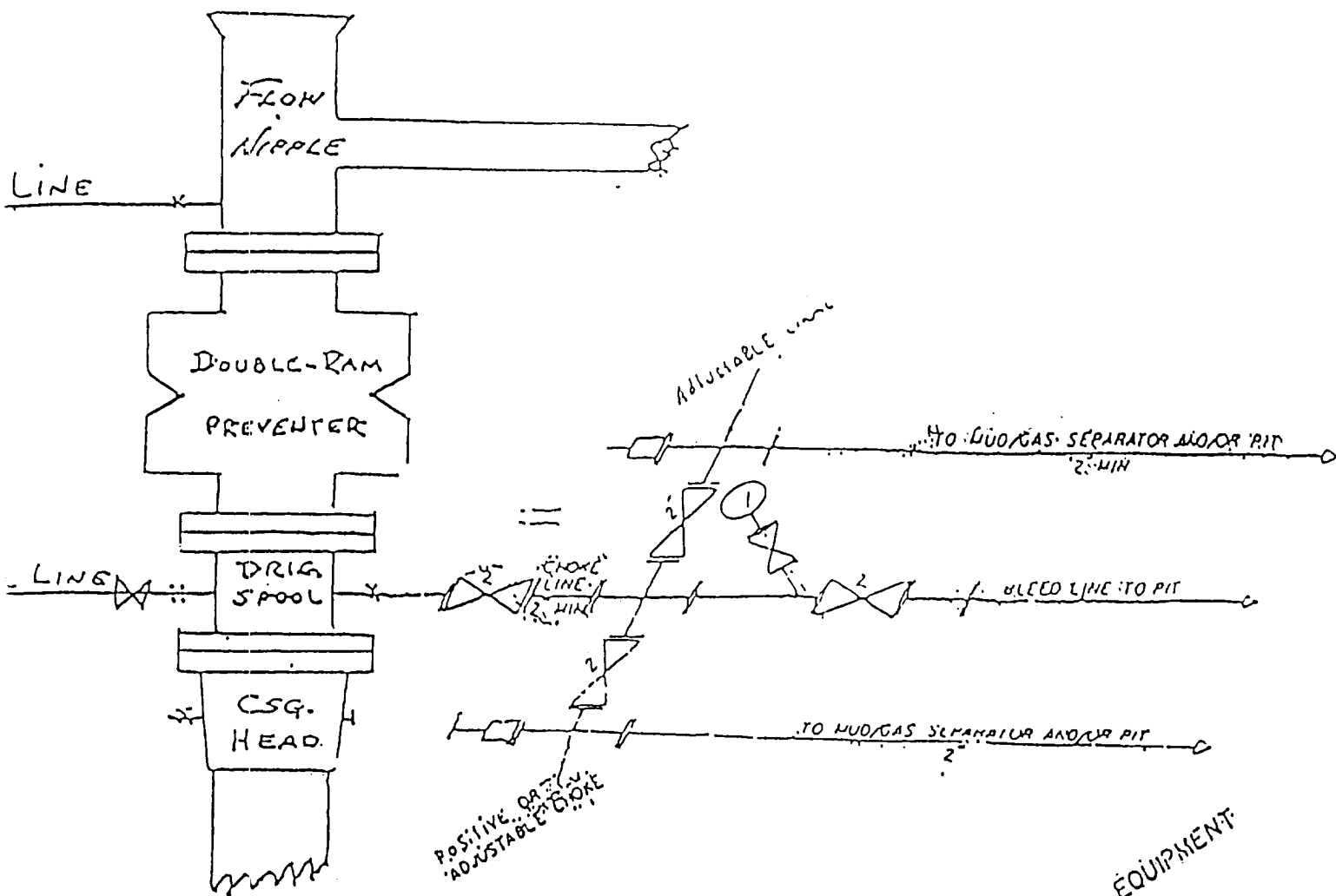
	OPERATOR CERTIFICATION I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief.  Signature RHONDA NELSON Printed Name PRODUCTION CLERK Title 5/25/95 Date	
	SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. MAY 16, 1995 Date Surveyed Signature & Seal of Professional Surveyor  W.O. Num. 95-11-0736	
	Certificate No. JOHN W. WEST 676 RONALD J. EIDSON 3239 GARY EIDSON 12641	

EXHIBIT #1

B O P & CHOKE MANIFOLD

10"/900 Cameron SS Space Saver
3000# Working Pressure
3000# Working Pressure Choke Manifold



2" CHOKE MANIFOLD EQUIPMENT