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	UNITED STATES DEPARTMENT OF THE INTERI UREAU OF LAND MANAGEM Y NOTICES AND REPORTS C	Artesia, NM 88210-2834	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No. LC-028784B
Do not use this form for pr Use "APPL	6. If Indian, Allottee or Tribe Name		
	7. If Unit or CA, Agreement Designation		
Type of Well     Gas     Well     Well     Well     Other     Ame of Operator		RECEIVED	BURCH KEELY UNIT 8. Well Name and No.
Marbob Energy Corpor 3. Address and Telephone No.	ation	NOV 1 8 1996	BURCH KEELY UNIT #266
P. O. Drawer 227, Artesia, NM 88210 505-748-7508 0			30-015-28886 pl0. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R 50 FNL 660 FWL SE		DIST. 2	GRBG JACKSON SR Q GRBG SA
12. CHECK APPROPI	RIATE BOX(s) TO INDICATE N		Eddy County, NM
TYPE OF SUBMISSIC		TYPE OF ACTION	
Notice of Intent		undonment	Change of Plans
XX Subsequent Report	Plu	ompletion gging Back	New Construction
Final Abandonment Not		ing Repair ering Casing er _ WELL # CHANGE	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.)* MARBOB ENERGY CORPORATION REQUESTS WELL NUMBER CHANGE. FROM: BURCH KEELY UNIT #817 TO: BURCH KEELY UNIT #266			
•			Post ID-3 12-13-96 chy well #
	<u>A</u>		
14. I hereby certify that the foregoing k tru Signed	Lelso	DUCTION CLERK	Date <u>11/6/96</u>
(This space for Federal or State office u Approved b <b>(ORIG. SGD.) ALEX</b> Conditions of approval, if any:		TROLEUM ENGINEER	Date 11/14/96
Title 18 U.S.C. Section 1001, makes it a cri or representations as to any matter within its	me for any person knowingly and willfully to ma jurisdiction.	ke to any department or agency of the United St	ates any false, fictitious or fraudulent statements

\*See Instruction on Reverse Side