

811 S 1ST ST.
ARTESIA NM 88210-2834

CLSF

Form 2160-5
(June 1990)

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

RECEIVED

JUN 13 1996

OIL CON. DIV
505-748-3303
DIST. 2

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
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
660 FNL 1295 FWL, SEC. 25-T17S-R29E UNIT D

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 #236
9. API Well No.
30-015-28913
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
☐ Notice of Intent	☐ Abandonment
☐ Subsequent Report	☐ Recompletion
☐ Final Abandonment Notice	☐ Plugging Back
	☐ Casing Repair
	☐ Altering Casing
	☒ Other <u>SPUD, CMT CSG</u>
	☐ 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.)*

5/23/96 SPUD WELL @ 7:15 A.M. DRILL 12 1/4" HOLE TO 393', RAN 9
JTS 8 5/8" J-55 CSG TO 381', CMT W/ 300 SX CLASS C W/ 2% CC,
PLUG DOWN @ 5:00 PM. TOC 76' (4 YD READY MIX). TSTD CSG TO 600#
FOR 20 MINUTES-- HELD OK.

14. I hereby certify that the foregoing is true and correct
Signed Rhonda Nelson Title PRODUCTION CLERK Date 5/28/96
(This space for Federal or State office use)
Approved by _____ Title _____ Date _____
Conditions of approval, if any: