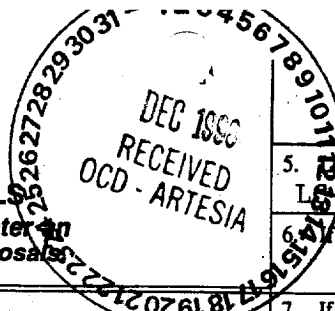


UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires July 31, 1996

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.



SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. L 028784B
2. Name of Operator MARBOB ENERGY CORPORATION		6. Indian, Allottee or Tribe Name
3a. Address P.O. BOX 227, ARTESIA, NM 88210	3b. Phone No. (include area code) 505-748-3303	7. If Unit or CA/Agreement, Name and/or No. BURCH KEELY UNIT
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980 FNL 1295 FWL, SEC. 25-T17S-R29E UNIT E		8. Well Name and No. BURCH KEELY UNIT #289
		9. API Well No. 30-015-29302
		10. Field and Pool, or Exploratory Area GRBG JACKSON SR Q GRBG SA
		11. County or Parish, State EDDY CO., NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>TD, CMT CSG</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

TD WELL @ 4:45 A.M. 12/2/98. DRLD 7 7/8" HOLE TO 4828', RAN 117 JTS 5 1/2" 17# CSG TO 4797', CMTD 1ST STAGE W/250 SX SUPER H, PLUG DOWN @ 3:15 P.M., CIRC 50 SX TO SURF, CMTD 2ND STAGE W/500 SX HALL LITE & 200 SX SUPER H, PLUG DOWN @ 8:00 P.M., CIRC 76 SX TO SURF. WOC 18 HRS, TSTD CSG TO 1500# FOR 30 MINUTES - HELD OK. DV TOOL @ 3262'.

14. I hereby certify that the foregoing is true and correct	
Name (Printed/Typed) ROBIN COCKRUM	Title PRODUCTION ANALYST
Signature <i>Robin Cockrum</i>	Date 12/3/98

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by	Title	Date
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	

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.

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SUBMIT IN TRIPLICATE - Other instructions on reverse side

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☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

MARBOB ENERGY CORPORATION

3a. Address

P.O. BOX 227, ARTESIA, NM 88210

3b. Phone No. (include area code)

505-748-3303

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1980 FNL 1295 FWL, SEC. 25-T17S-R29E UNIT E

5. Lease Serial No.

LC-028784B

6. If Indian, Allottee or Tribe Name

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BURCH KEELY UNIT

8. Well Name and No.

BURCH KEELY UNIT #289

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GRBG JACKSON SR Q GRBG SA

11. County or Parish, State

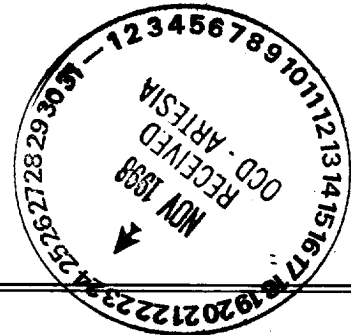
EDDY CO., NM

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<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>SPUD, CMT CSG</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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SPUD WELL @ 1:15 P.M. 11/21/98. DRLD 12 1/4" HOLE TO 400', RAN 9 JTS 8 5/8" 24# CSG TO 376', CMTD W/400 SX CLASS C, PLUG DOWN @ 9:30 P.M., CIRC 120 SX TO SURF. WOC 18 HRS, TOOK OPTION 2 PER TEST DATED 8/20/96.



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

Name (Printed/Typed)

ROBIN COCKRUM

Signature

Robin Cockrum

Title

PRODUCTION ANALYST

Date

11/23/98

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

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