

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N. 1st St
811 S. 1st

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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 #273

9. API Well No.

30-015-29311

10. Field and Pool, or Exploratory Area

GRBG JACKSON SR Q GRBG SA

11. County or Parish, State

EDDY, NM

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. BOX 227, ARTESIA, NM 88210

505-748-3303

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980 FNL 1295 FEL SEC. 26-T17S-R29E UNIT H

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

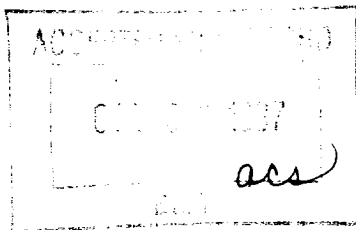
TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other SPUD, CMT CSG
☐ 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.)*

SPUD WELL @ 5:00 P.M. 9/28/97. DRLD 12 1/4" HOLE TO 416', RAN 9 JTS 8 5/8" J-55 24# CSG TO 416', CMTD W/350 SX PREM PLUS, PLUG DOWN @ 2:15 A.M. 9/29/97, CIRC 45 SX TO SURF. WOC 18 HRS, TOOK OPTION 2 PER TEST DATED 8/20/96.



RECEIVED
OCT - 1 A 10:55
BUREAU OF LAND MGMT.
ROSWELL OFFICE

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

Signed

Khonda Nelson

Title PRODUCTION CLERK

Date

9/30/97

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: