

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N. M. ...
811 S. 1st

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

451

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

5. Lease Designation and Serial No.
LC-028784B

6. If Indian, Allottee or Tribe Name
BURCH KEELY UNIT

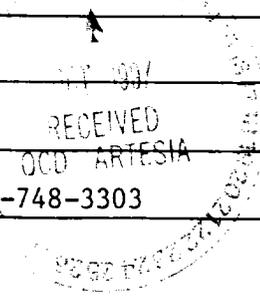
7. If Unit or CA, Agreement Designation
BURCH KEELY UNIT #273

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



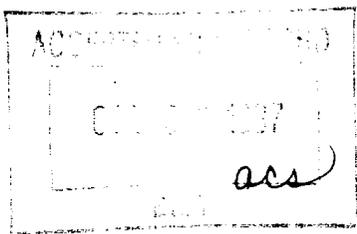
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other SPUD, CMT CSG
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> 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: