

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

AMENDED

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

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. LC-028784C
2. Name of Operator Marbob Energy Corporation	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. Drawer 227, Artesia, NM 88210 505-748-3303	7. If Unit or CA, Agreement Designation BURCH KEELY UNIT
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 955 FNL 365 FWL SEC. 26-T17S-R29E UNIT D	8. Well Name and No. BURCH KEELY UNIT #268
	9. API Well No.
	10. Field and Pool, or Exploratory Area GRBG JACKSON SR Q GRBG SA
	11. County or Parish, State Eddy County, NM

2. 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"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other CHANGE LOCATION PAD	<input type="checkbox"/> Dispose Water
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)		

1. 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 IS AMENDING THE LOCATION PAD (EXHIBIT #5)
SUBMITTED WITH THE SURFACE USE PLAN FILED FOR THIS WELL.

RECEIVED

APR 09 1997

I hereby certify that the foregoing is true and correct

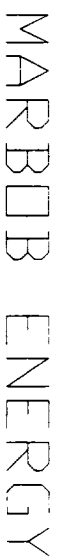
Signed Rhonda Nelson Title PRODUCTION CLERK Date 3/12/97

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any: _____

ROAD



955' FNL & 365' FWL

SEC. 26-T17S-R29E

EDDY COUNTY, NEW MEXICO