

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division

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	2. Name of Operator MARBOB ENERGY CORPORATION	3. Address and Telephone No. P. O. BOX 227, ARTESIA, NM 88210 505-748-3303	5. Lease Designation and Serial No. LC-028784B
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660 FNL 2615 FWL, SEC. 25-T17S-R29E UNIT C	10. Field and Pool, or Exploratory Area GRBG JACKSON SR Q GRBG SA		11. County or Parish, State EDDY CO, NM

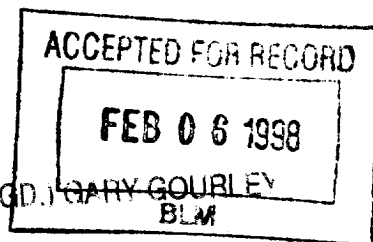
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input 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 checked="" type="checkbox"/> Other SPUD, CMT CSG	<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 @ 2:45 P.M. 1/25/98. DRLD 12 1/4" HOLE TO 420',
RAN 9 JTS 8 5/8" J-55 24# CSG TO 405', CMTD W/350 SX HALL
LITE, PLUG DOWN @ 11:30 P.M. 1/25/98, CIRC 87 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

Signed Rhonda Nelson Title PRODUCTION CLERK Date 1/27/98

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: