Form 3160-5 (November 1994)

UNLIED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

Lease Serial No.

NM0467932

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use th abandoned we	6. If Indian, Allottee or Tribe Name		
SUBMIT IN TR	IPLICATE - Other inst	ructions on reverse side	7. If Unit or CA/Agreement, Name and/or No.
1. Type of Well XX Oil Well Gas Well	Other		8. Well Name and No.
2. Name of Operator ∨ MARBOB ENERGY CORE	PORATION		E.L. FEDERAL #2
3a. Address P.O. BOX 227, ARTESIA, NM 88210		3b. Phone No. (include area code)	30-015-30256
		505-748-3303	10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			LOCO HILLS PADDOCK
330 FNL 330 FEL, S	SEC. 21-T17S-R30E	UNIT A	11. County or Parish, State EDDY CO., NM
12. CHECK AP	PROPRIATE BOX(ES)	TO INDICATE NATURE OF NOTICE, I	REPORT, OR OTHER DATA
TYPE OF SUBMISSION		TYPE OF ACTION	
□ Notice of Intent □ Subsequent Report	Acidize Alter Casing Casing Repair	Deepen Production (State Production Prod	water Shut-Off Well Integrity Other EXTEND APD
Final Abandonment Notice	Change Plans Convert to Injection	Plug and Abandon Temporarily A Plug Back 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 recomplete 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 recompletion 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.)

WE REQUEST A ONE YEAR EXTENSION FOR THE APD ON THE ABOVE MENTIONED WELL



14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) ROBIN COCKRUM PR	e RODUCTION ANA	LYST	
Signature Date 5/	e '4/99		
THIS SPACE FOR FEDERAL O	R STATE OFFICE	USE TO THE TOTAL	
Approved by	Title	Date	
Conditions of approval, if any, are attached. Approval of this notice does not warrant o 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.