

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

CISF

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other Instructions on reverse side

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
 MARBOB ENERGY CORPORATION

3a. Address
 P.O. BOX 227, ARTESIA, NM 88210

3b. Phone No. (include area code)
 505-748-3303

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
 2615 FNL 495 FWL, SEC. 26-T17S-R29E UNIT E

5. Lease Serial No.
 LC-028784C

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
 BURCH KEELY UNIT

8. Well Name and No.
 BURCH KEELY UNIT #288

9. API Well No.
 30-015-30394

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(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION				
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off	
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity	
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>SPUD, CMT CSG</u>	
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon		
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> 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 recomplate 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 recomplate 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.)

SPUD WELL @ 6:00 P.M. 9/27/98. DRLD 12 1/4" HOLE TO 410', RAN 9 JTS 8 5/8" J-55 24# CSG TO 410', CMTD W/ 50 SX THXTROPIC & 400 SX PRM PLUS, PLUG DOWN @ 3:15 A.M. 9/28/98, CIRC 23 SX TO SURF. WOC 18 HRS, TOOK OPTION 2 PER TEST DATED 8/20/96.

ACCEPTED FOR RECORD
 (ORIG. SGD.) DAVID R. GLASS
 OCT 22 1998

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

Name (Printed/Typed)
 RHONDA NELSON

Signature
Rhonda Nelson

Title
 PRODUCTION ANALYST

Date
 9/29/98

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or 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