

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.
LC-029395A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
TONY FEDERAL #7

9. API Well No. ☒
30-015-30428

10. Field and Pool, or Exploratory Area
CEDAR LAKE YESO

11. County or Parish, State

EDDY CO., NM

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)
230 FNL 2510 FEL, SEC. 19-T17S-R31E UNIT B

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

TYPE OF SUBMISSION

☐ Notice of Interest
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

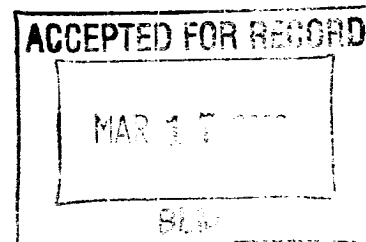
☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other TD, CMT CSG

☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ 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.)*

TD WELL @ 1:45 A.M. 3/12/00. DRILL 7 7/8" HOLE TO 5180', RAN 126 JTS 5 1/2" J-55 17# CSG TO 5180', CMTD 1ST STAGE W/300 SX MOD SUPER H, PLUG DOWN @ 3:00 A.M. 3/13/00, CIRC 40 SX TO SURF, CMTD 2ND STAGE W/600 SX H/L & 300 SX P+, PLUG DOWN @ 12:00 NOON 3/13/00, CIRC 100 SX TO SURF. WOC 18 HRS, TSTD CSG TO 1500# FOR 30 MINUTES - HELD OK. DV TOOL @ 3605'.



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

Signed Robin Lockman

Title PRODUCTION ANALYST

Date 03/14/00

(This space for Federal or State office use)

Approved by
Conditions of approval, if any:

Title

Date

RECEIVED

MAR 15 2000

BLM
ROSWELL, NM