Form 3160-5 (June 1990)

Approved by Conditions of approval, if any:

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-028775A

Date ...

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		6. If Indian, Allottee or Tribe Name rvoir.
		7. If Unit or CA, Agreement Designation
1. Type of Well		
Oil Gas Well Well Other		8. Well Name and No.
2. Name of Operator 🗸		B 440 FEDERAL #4
MARBOB ENERGY CORPORATION 3. Address and Telephone No.		9. API Well No.
P.O. BOX 227, ARTESIA, NM 88210 505-748-3303		30-015-30477 10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		EAST EMPIRE YESO
1650 FSL 2310 FEL, SEC. 27-T17S-R29E UNIT J		11. County or Parish, State
		•
		EDDY, NM
12. CHECK APPROPRIATE BOX(s) TO I	NDICATE NATURE OF NOTICE, REPOR	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACT	ION
Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
X Subsequent Report	Plugging Back	Non-Routire Fracturing
	Casing Repair	Water Shu:-Off
Final Abandonment Notice	Altering Casing	Conversior to Injection
	Other SPUD, CMT CSG	Dispose Water (Note: Report results of multiple completion on Well Completion or Reconspletion Report and Log form.)
13. Describe Proposed or Completed Operations (Clearly state all p directionally drilled, give subsurface locations and measured and SPUD WELL @ 3:15 P.M. 8/24/99. DRLD 12 1/4" HPLUS, PLUG DOWN @ 12:45 A.M. 8/25/99, CMT 15 MINUTES - HELD OK.	d true vertical depths for all markders and zones pertinent to the control of the	to this work.)* GG TO 428', CMTD \V/400 SX PREM
14. I hereby certify that the foregoing is true and correct Signed KOM CELLULO (This space for Federal or State office use)	Title PRODUCTION ANALYST	Date 08/:26/99

Title _____