

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
811 S. 1st Street
Artesia, NM 88210-2834

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

14F

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

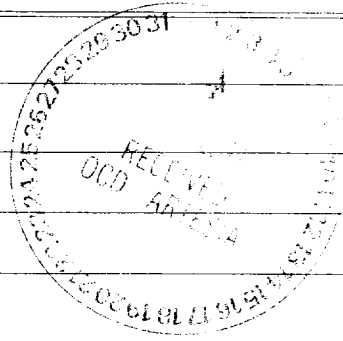
SUBMIT IN TRIPLICATE

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)
1980 FNL 1295 FEL, SEC. 14-T17S-R29E UNIT H



5. Lease Designation and Serial No.
LC-028731B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
M DODD B #68

9. API Well No.
30-015-31041

10. Field and Pool, or Exploratory Area
GRAYBURG MORROW

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 checked="" 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 <u>ALTER TD & CSG PROGRAM</u>	<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.)*

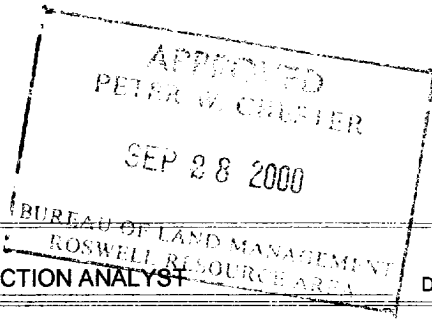
WE PROPOSE TO MAKE THE FOLLOWING CHANGES TO THE APD CHICH WAS APPROVED 3/20/00:

FIELD AND POOL: GRAYBURG MORROW

TD: 11,500'

CASING & CEMENTING PROGRAM:

13 3/8" CSG, 54.5#, K-55, ST&C TO 400', CMT TO SURF
8 5/8" CSG, 24#, J-55, ST&C TO 2200', CMT TO SURF
8 5/8" CSG, 32#, J-55, ST&C TO 2300', CMT TO SURF
5 1/2" CSG, 17#, N-80, LT&C TO 11,500', CMT SUFFICIENT TO COVER 200' ABOVE ALL KNOWN OIL & GAS HORIZONS



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

Signed Robin Cockrum Title PRODUCTION ANALYST Date 09/26/00

(This space for Federal or State office use)

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

