

**N.M.O.C.D. COPY**  
**UNITED STATES**  
**DEPARTMENT OF THE INTERIOR**  
**GEOLOGICAL SURVEY**

SUBMIT IN TR. CATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-11424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-27279

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

**SUNDRY NOTICES AND REPORTS ON WELLS**

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

**RECEIVED**

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR  
Marbob Energy Corporation

SEP 15 1980

3. ADDRESS OF OPERATOR  
P.O. Box 304, Artesia, N.M. 88210

O. C. D.  
ARTESIA, OFFICE

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

990' FNL, 990' FWL of Sec. 28

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Elliott Fed.

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

North Benson

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 28-T18S-R30E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3440' GR

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

|                          |
|--------------------------|
| <input type="checkbox"/> |
| <input type="checkbox"/> |
| <input type="checkbox"/> |
| <input type="checkbox"/> |

PULL OR ALTER CASING

|                          |
|--------------------------|
| <input type="checkbox"/> |
| <input type="checkbox"/> |
| <input type="checkbox"/> |
| <input type="checkbox"/> |

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

|                          |
|--------------------------|
| <input type="checkbox"/> |
| <input type="checkbox"/> |
| <input type="checkbox"/> |
| <input type="checkbox"/> |

REPAIRING WELL

|                                     |
|-------------------------------------|
| <input type="checkbox"/>            |
| <input type="checkbox"/>            |
| <input type="checkbox"/>            |
| <input checked="" type="checkbox"/> |

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

Cement

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

17. 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.)\*

9/1/80 TD 3512', conditioned hole, lay down drill pipe & collars, ran guide shoe and float collar, 10 centralizers and 106 jts. 4 1/2" 10.50# new casing, ran DV tool set @ 2244', pumped 350 sax Class H cement, 5/10 of 1% CFR 2, 5# salt, 10# sand per sack, plug down @ 4:20 a.m., landed casing @ 3512' KB, 3500' GR, rig released. Preparing to go ahead w/cementing stages.

**RECEIVED**

SEP 5 1980

U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

*Carelyn Ann*

TITLE

Production Clerk

DATE 9/3/80

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

*P. Chester*

DATE

SEP 9 1980

\*See Instructions on Reverse Side  
U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO

1972-73

1973-74

1974-75

1975-76

1976-77

1977-78

1978-79

1979-80

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-27279

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT" for such proposals.)

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Marbob Energy Corporation

3. ADDRESS OF OPERATOR

P.O. Box 304, Artesia, N.M. 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

990' FNL &amp; 990' FWL of Section 28

14. PERMIT NO.

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3440' GR

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Elliott Ed.

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SURVEY OR AREA

Sec. 28-T18S-30E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

16.

## Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

## SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANS

(Other)

Spud, cementing

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

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Well was spudded 4:00 p.m. 8/27/80, drilling 12½" hole to 520', ran 13 jts. 8 5/8" 24# new casing, texas pattern shoe and insert float, landed @ 500.49' GL, 512.49' KB, pumped 325 sax Class C 2% calcium chloride, plug down @ 12:30 a.m. 8/28/80, loss of circulation @ 65', will ready mix to surface w/10 yards. WOC 18 hrs.

RECEIVED

AUG 29 1980

U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

*Carolyn Aris*

TITLE

Production Clerk

DATE

8/28/80

(This space for Federal or State office use)

APPROVED BY

TITLE

ACCEPTED FOR RECORD

*P. Chester*

SEP 9 1980

DATE

CONDITIONS OF APPROVAL, IF ANY:

U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO

\*See Instructions on Reverse Side

1940

1941

1942

1943

1944

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