

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OK *AB*
12-13-94

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

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

MARALO, INC.

3. Address and Telephone No.

P. O. BOX 832, MIDLAND, TX 79702 (915) 684-7441

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1783' FNL & 1259' FEL, SECTION 26, T20S, R26E, EDDY CO., NM

5. Lease Designation and Serial No.

NM 89038

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

D.S. "26" FEDERAL #1

9. API Well No.

10. Field and Pool, or Exploratory Area

WILDCAT

11. County or Parish, State

EDDY, NM

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

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other **CASING PROGRAM DETAILING ON ORIGINAL APPLICATION TO DRILL**
- ☐ 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.)*

ITEM #3 (ORIGINAL APPLICATION DEFINED)

THE 8-5/8" CASING WEIGHT WILL BE 32# CASING EXCLUSIVELY. (AFTER 2000' SETTING DEPTH, MARALO, INC. CUSTOMARILY USES 32# CASING.)

ITEM #4 (ORIGINAL APPLICATION DEFINED)

THE 5-1/2" CASING WILL BE EXCLUSIVELY 17# N-80 TO SETTING DEPTH.

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

Signed *Dorothy Legan*

Title **REGULATORY ANALYST**

Date **DECEMBER 1, 1994**

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____