

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Oil Cons. **C/SR**  
N.M. DIV-Dist. 2  
1301 W. Grand Avenue  
Artesia, NM 88210  
FORM APPROVED  
Bldg. No. 1004-0135  
Expires: March 31, 1993  
For Lease Information and Serial No.  
NM-100316

**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.  
PO BOX 227, ARTESIA, NM 88211-0227, 505-748-3303  
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
850 FNL 847 FWL, SEC. 23-T26S-R24E, UNIT D

6. If Indian, Allottee or Tribe Name  
7. If Unit or CA, Agreement Designation  
8. Well Name and No.  
PRIMERO FEDERAL #1  
9. API Well No.  
30-015-30503  
10. Field and Pool, or Exploratory Area  
WASH RNCH: MORROW, S GAS  
11. County or Parish, State

EDDY

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 PRODUCED WATER DISP

Change of Plans  
New Construction  
Non-Routine Fracturing  
Water Shut-Off  
Conversion to Injector  
Dispose Water

(Note: Report results of multiple completion or 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.)

MARBOB ENERGY CORPORATION REQUESTS APPROVAL FOR THE PRODUCED WATER FROM THE REFERENCED WELL TO BE TRUCKED BY HUGHES SERVICES AND PROPERLY DISPOSED OF AT THE LOCO HILLS DISPOSAL WELL, OR ALTERNATIVELY, AT THE TENNESSEE SWD. THIS WELL MAKES MINIMAL AMOUNTS OF WATER AND HAS NOT ACCUMULATED ENOUGH TO TRANSPORT AS OF THIS DATE. A COPY OF THE WATER ANALYSIS REPORT IS ATTACHED.

**SEE ATTACHED FOR  
CONDITIONS OF APPROVAL**

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

Signed: *Liana J. Cannon*  
(This space for Federal or State office use)

Approved by  
Conditions of approval, if any:

Title PRODUCTION ANALYST

Date 02/19/02

Title

Date

Title  
state

Accepted for record

only **FEB 22 2002**

y and willfully to make to any department or agency of the United States any false, fictitious or fraudulent

\*See Instruction on Reverse Side