Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

NOV 07 '94
O.C.D.

5. Lease Designation and Serial No.

LC-028784A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

1. Type of Well		
[X] Oil Well	[ ] Gas Well	[ ] Other

2. Name of Operator

Marbob Energy Corporation

3. Address and Telephone No.

P. O. Drawer 217, Artesia, NM 88210   505-748-3303

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

685 FNL 1305 FWL, Sec. 24-T17S-R29E, Unit D

8. Well Name and No.

Keely A Federal #34

9. API Well No.

30-015-27653

10. Field and Pool, or Exploratory Area

Grbg Jackson SR Q Grbg SA

11. County or Parish, State

Eddy County, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION	
[ ] Notice of Intent	[ ] Abandonment	[ ] Change of Plans
	[ ] Recompletion	[ ] New Construction
[XX] Subsequent Report	[ ] Plugging Back	[ ] Non-Routine Fracturing
	[ ] Casing Repair	[ ] Water Shut-Off
[ ] Final Abandonment Notice	[ ] Altering Casing	[ ] Conversion to Injection
	[XX] Other requesting extension	[ ] 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.)*

Marbob Energy Corporation requests a 1 (one) year
extension of the A.P.D. for the above stated well.

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

Signed Rhonda Nelson   Title Production Clerk   Date 11/4/94

(This space for Federal or State office use)

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

*See Instruction on Reverse Side