

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.

NMLC068848

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Marshall Federal #8

9. API Well No.

30-025-08361 25642

10. Field and Pool, or Exploratory Area

CAVE DELAWARE

11. County or Parish, State

Lea

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Pronghorn Mgt. Corp.

3. Address and Telephone No.

P.O. Box 1772 Hobbs N.M. 88241 505-392-2495

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

2600' FSL - 1230' FWL

519-T235-A33E

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

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

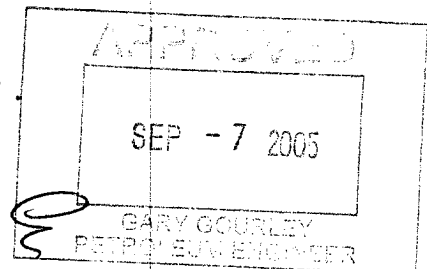
- ☒ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(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.)*

1. Move in p + a equipment. PDAH with production equipment.
2. Set C. I. B. P. @ ± 4950'. Cap w/ 35' cement.
3. Circulate hole w/ mud laden fluid.
4. Spot 100' plug @ 2900' - 3000'.
5. Spot 100' plug @ 1173' - 1273' - 8 5/8" shoe. (TAG)
6. Set surface plug. Cut off well head
Erect dry hole marker. Clean location.

APPROVED FOR 3 MONTH PERIOD
ENDING Dec 7, 2005



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

Signed [Signature]

Title Partner

Date 08/24/05

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____