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Form 3160-5 (September 2001)	DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT			1 3 2005 ARTERIA		FORM APPROVED OMB No. 1004-0135 Expires January 31, 2004		
				5. Lease Serial No.				
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.					C ICI-1	NMLC029395A		
					6. If Indian, Allottee or Tribe Name			
SUBMIT IN TRIPLICATE - Other instructions on reverse side					7. If Uni	7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well					-			
Oil Well Gas Well Other 2. Name of Operator						8. Well Name and No. TONY FEDERAL BATTERY 9. API Well No.		
MARBOB ENERGY CORPORATION								
3a. Address 3b. Phone No. (include area code)					30-015-30244 10. Field and Pool, or Exploratory Area			
PO BOX 227, ARTESIA, NM 88211-0227 (505) 748-3303								
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					CEDAR LAKE; YESO 11. County or Parish, State			
					11. Coun	y or Pa	insn, State	
SEC. 18-T17S-R31	E, UNIT K				EDD	Y CC)., NM	
12. CHECK A	PPROPRIATE BOX(ES) T	O INDICAT	E NATURE (OF NOTICE, R	EPORT, C	OR OT	THER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION							
****	Acidize	Deepen		Production (Star	1/Resume)		Water Shut-Off	
Notice of Intent	Alter Casing	☐ Fracture			4	ā	Well Integrity	
Subsequent Report	Casing Repair	New Con	struction \Box	Recomplete		X	Other APPLY COATING	
	Change Plans	Plug and			andon		NOT OF BLM COLOR	
Final Abandonment Notice	Convert to Injection	Plug Baci	, 0	Water Disposal				
following completion of the in testing has been completed. F determined that the site is ready APPLIED A COATING I WILL REDU LOSS OF F	A PROTECTIVE GRAPH S GRAY IN COLOR, JCE THE CHANCE OF	on results in a much be filed only after the coat of t	ultiple completioner all requirements ING TO FI REDUCE S BEING ST	on or recompletion ints, including recl EVERGLASS STATIC ELE PRUCK BY L	in a new inte amation, have WATER T CTRICIT IGHTNIN	'ANKS'Y.	Form 3160-4 shall be filed once completed, and the operator has 5. THIS THIS IN TURN ND PREVENT	
14. I hereby certify that the foregoin Name (Rrinted/Typed) DIANA J Signature	BRIGGS THIS SPACE F	OR FEDERA	Date OC	ODUCTION TOBER 12,	ANALYST	cord .	MMOCD	
			Ī	ACC				
Approved by			Title	•	r	Date		
Conditions of approval, if any, are certify that the applicant holds lega which would entitle the applicant to	il or equitable title to those right							

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.