Form 3160-5 (April 2004)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OM B No. 1004-0137 Expires: March 31, 2007

Expires: March 31, 200

BUREAU OF LAND MANAGEMENT				I.	5. Lease Serial No. NMLC028731B	
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.					6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE- Other instructions on reverse side.				7. If Unit or CA/Agreement, Name and/or No. NMNM111789X		
1. Type of Well Oil Well Gas Well	e of Well Oth Well Gas Well Other			8. Well Na	me and No.	
2. Name of Operator Marbob Energy Corporation		OCD-ARTESIA		Dodd Federal Unit #38 9. API Well No.		
3a. Address PO Box 227, Artesia, NM 88211-0227		3b. Phone No. (include area code) 575-748-3303		10. Field ar	-20079 ad Pool, or Exploratory Area	
4. Location of Well (Footage, Sec., T., R., M., or			G-J-SR-O-G-SA			
1980 FNL 1980 FEL, Sec. 15-T17S-R29E, Unit G					or Parish, State	
				Co., NM		
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA						
TYPE OF SUBMISSION TYPE OF ACTION						
Notice of Intent Subsequent Report Casi Char	Acidize Deepen Production (Start/Resume) Water Shut-Off Alter Casing Fracture Treat Reclamation Well Integrity Casing Repair New Construction Plug and Abandon Temporarily Abandon					
Final Abandonment Notice Convert to Injection Plug Back Water			Water Disposa	sposal		
13. Describe Proposed or Completed Operation If the proposal is to deepen directionally or or Attach the Bond under which the work will I following completion of the involved operat testing has been completed. Final Abandom determined that the site is ready for final insp September, 1984 - Additional perfs as \$x\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ecomplete horizontall be performed or provious. If the operation ment Notices shall be section.)	ly, give subsurface locat ide the Bond No. on fil- results in a multiple cor filed only after all requi	ions and measured and e with BLM/BIA. Requ inpletion or recompletion rements, including recla	true vertical dept ired subsequent n in a new interve imation, have bed	hs of all pertinent markers and zones. reports shall be filed within 30 days al, a Form 3160-4 shall be filed once en completed, and the operator has	
14. Thereby certify that the foregoing is true Name (Printed/Typed)	e and correct			1		
Diana J. Briggs			Title Production Analyst			
Signature LLA O TOTAL CA				11/02/2007		
THIS SPACE FOR FEDERAL OR STATE OFFICE USE						
1		V	m: .1		D.4.	
Approved by Conditions of approval, if any, are attached. Ap	does not warrant or	Title		Date		
Tomanions of approval, it ally, are anaelled. Ap	prover or and nonce	GOOD HOL WALLAND OF				

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.

Office

certify that the applicant holds legal or equitable title to those rights in the subject lease

which would entitle the applicant to conduct operations thereon.