

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

c157
lp

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

RECEIVED
MAR 17 1993
O.C.D.
ARTESIA

API NO. (assigned by OCD on New Wells) 30-005-62882
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. B-8385

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work: DRILL ☐ RE-ENTER ☒ DEEPEN ☐ PLUG BACK ☐	7. Lease Name or Unit Agreement Name State CF
b. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER P&A ☐ SINGLE ZONE ☒ MULTIPLE ZONE ☐	8. Well No. 9
2. Name of Operator Marbob Energy Corporation	9. Pool name or Wildcat Undesignated Devonian
3. Address of Operator P. O. Drawer 217, Artesia, NM 88210	
4. Well Location Unit Letter P : 920 Feet From The South Line and 1310 Feet From The East Line Section 13 Township 11S Range 27E NMPM Chaves County	

10. Proposed Depth 6568' (Existing)	11. Formation Devonian	12. Rotary or C.T. ROTARY
13. Elevations (Show whether DF, RT, GR, etc.) 3767.2' GR	14. Kind & Status Plug. Bond statewide	15. Drilling Contractor L & R Drilling
16. Approx. Date Work will start 3/26/93		

17. PROPOSED CASING AND CEMENT PROGRAM					EST. TOP
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	
(EXISTING) 12 1/4"	8 5/8"	24#	1229'	550 sx Class C	
7 7/8"	5 1/2"	17#	6530	200 sx Class C	

Marbob Energy Corporation proposes to re-enter well, CO to TD (6568'), run 5 1/2" casing to 6530', complete open hole, test the Devonian formation, put well on production.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Rhonda Nelson TITLE Production Clerk DATE 3/16/93

TYPE OR PRINT NAME _____ TELEPHONE NO. 748-3303

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

TITLE _____ DATE MAY 28 1993

APPROVED BY _____

CONDITIONS OF APPROVAL, IF ANY:

NSL R-9892