

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

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 HUBBS, N.M. 88240 505-392-2495

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

1980' FSL 1910' FWL

519-T235-R33E

SEE ATTACHED FOR

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.

NM LC 068848

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

MARSHALL 2 SWD

9. API Well No.

30-025-08359

10. Field and Pool, or Exploratory Area

CAUZ Delaware

11. County or Parish, State

LEA

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+u equipment. POOH w/ packer + tubing

2. Set C.I.B.P. @ 4950'. Cap w/ 35' cement

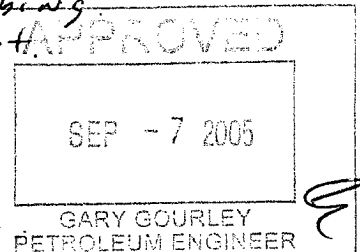
3. Circulate hole w/ mud index fluid.

4. Spot 100' plug 2900'-3000'

5. Spot 100' plug 330'-430'-7 5/8" shoe

6. Set surface plug. Cut off well head

7. Erect day hole marker. Clean location.



APPROVED FOR 3 MONTH PERIOD

ENDING

Dec. 07, 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