

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

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other P: A	5. Lease Designation and Serial No. NM-1535A
2. Name of Operator Marbob Energy Corporation	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. Drawer 227, Artesia, NM 88210 505-748-3303	7. If Unit or CA, Agreement Designation LAMBERT 58 DEEP UNIT
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 330 FNL 1010 FWL SEC. 8-T13S-R31E UNIT D	8. Well Name and No. LAMBERT 58 DEEP UNIT #1
	9. API Well No. 30-005-21144
	10. Field and Pool, or Exploratory Area WILDCAT DEVONIAN
	11. County or Parish, State CHAVES COUNTY, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other _____	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

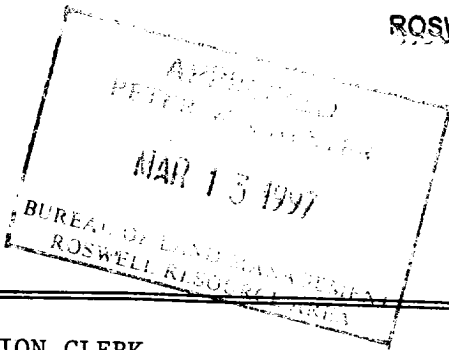
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

AS PER PETE CHESTER W/BLM-ROSWELL RECEIVED VERBAL
APPROVAL TO WELD ON PLATE SEALING OFF ANNULUS
BETWEEN 13 3/8" & 8 5/8" CSG.

RECEIVED

MAR 11 97

BLM
ROSWELL, NM



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

Signed Phonda Nelson Title PRODUCTION CLERK Date 3/10/97

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any: _____