

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons
1980
Hobbs, NM 88241

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

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

MARBOB ENERGY CORPORATION

3. Address and Telephone No.

P. O. BOX 227, ARTESIA, NM 88210

505-748-3303

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

1442 FNL 2174 FWL, SEC. 34-T10S-R30E UNIT F

5. Lease Designation and Serial No.

NM-69175

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

APACHE SPRINGS FEDERAL #1

9. API Well No.

10. Field and Pool, or Exploratory Area

WILDCAT

11. County or Parish, State

CHAVES, NM

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

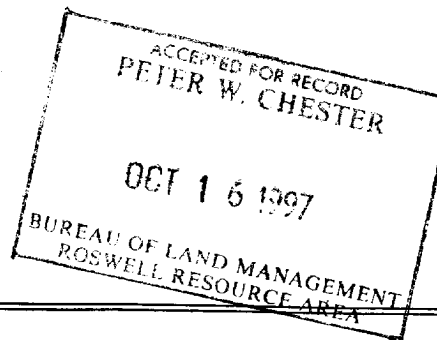
- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other INTERMEDIATE CSG

- ☐ 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.)*

10/2/97 DRLD 12 1/4" HOLE TO 2995', RAN 68 JTS 8 5/8" 24# J-55
CSG TO 2995', CMT W/ 1250 SX HALL LITE & 200 SX PREM
PLUS, PLUG DOWN @ 9:00 A.M., CIRC 247 SX TO SURF. WOC
18 HRS, TSTD CSG TO 1500# FOR 30 MINUTES - HELD OK.



RECEIVED
OCT - 8 A 3:25
BUREAU OF LAND MANAGEMENT
ROSWELL OFFICE

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

Signed Chonda Nelson Title PRODUCTION CLERK

Date 10/7/97

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____