

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on re-
verse side)

Modified Form 1b.

MD60-3160-4

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER <u>WIW</u>		31. Area Code & Phone No. (505) 748-3303		5. LEASE DESIGNATION AND SERIAL NO. <u>LC-029406(B)</u>	
2. NAME OF OPERATOR <u>Marbob Energy Corporation</u>				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR <u>P. O. Drawer 217, Artesia, NM 88210</u>				7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) <u>At surface</u>				8. FARM OR LEASE NAME <u>Grace Mitchell "B"</u>	
14. PERMIT NO.		15. ELEVATIONS (Show whether OF, RT, GR, etc.) <u>4131' DE</u>		9. WELL NO. <u>5</u>	
				10. FIELD AND POOL, OR WILDCAT <u>Maljamar Grbg SA</u>	
				11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 5-T17S-R32E</u>	
				12. COUNTY OR PARISH 13. STATE <u>Lea NM</u>	

10. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Return to active injection

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

17. 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.) *

We propose to put back on active injection as follows:

RIH w/overshot and pull pkr. RIH w/3 3/4" bit and clean out csg to 4132' PBTD. RIH w/2 3/8" plastic coated tbh and new 4 1/2 R-4 pkr and set pkr at 3850'. Circ. pkr fluid. Test csg to 500# for 30 minutes. Put back injection.

RECEIVED
APR 9 8 21 AM '90
CARLISLE DISTRICT
AREA HEADQUARTERS

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

SIGNED

Rhonda Nelson

TITLE Production Clerk

DATE April 2, 1990

(This space for Federal or State office use)

APPROVED BY Dir. Signed by Adam S. Smith
CONDITIONS OF APPROVAL, IF ANY:

TITLE PETROLEUM ENGINEER

DATE 4-24-90

Subject to
Like Approval
by State

*See Instructions on Reverse Side