Form 31605 July 1989)	UNITE STA	ATES HE INTERIO	OF OPIES REQUIRE (Other instructions R verse side)	I N	1X60-3160-4 se designation and	BERIAL NO.
Formerly 9-331) UEP/	JREAU OF LAND MA	ANAGEMENT		1==	029406(B)	TRIBE NAME
SUNDRY SUNDRY OF Use "AI	OTICES AND F	REPORTS Of leepen or plug bac IT—" for such prop	WELLS k to a different reservoir.			
				7, 04	T AGRESMENT NAME	
WELL J WELL OT  NAME OF OPERATOR	ner WIW		3n. Aren Code & Pix	ייין יטיו בירוכ	M OR LEASE NAME	
Marbob Energy Corp	oration		(505) 748-33	1	<u>ce Mitchell "</u>	'B''
P. O. Drawer 217,		6				
LOCATION OF WELL (Report loc.	ation clearly and in accor	dance with any St	ate requirements.*	1	ELD AND POOL, OR WIL	
At surface		•			jamar Grbg SA	
1980 FSL 1980			Soc	5-T17S-R32F	· ·	
anit &				ı	OUNTY OR PARISH 13.	
14. PERMIT 80.	i	Show whether DF, R	t, GR, etc.)	Lea	•	NM
		103' DF	( )			
10. Che-	ck Appropriate Box	To Indicate Na	ture of Notice, Repor	SUBSEQUENT EE	PORT OF:	
NOTICE OF	INTENTION TO:	r			REPAIRING WELL	<u> </u>
TEST WATER SHUT-OFF	PULL OR ALTER CAS	1 1 1	WATER SHUT-OFF FRACTURE TREATMEN	Ţ	ALTERING CASING	
PRACTURE TREAT	MULTIPLE COMPLET		MIDOTING OR ACIDIZE	1 - 1	ABANDONMENT*	
REPAIR WELL	CHANGE PLANS		(Other)	results of mul	tiple completion on V	
(Other) Return to a	active injection	tate all pertinent	Completion or	Recompletion R	eport and Log form.	eterting any
proposed work. If well is	ren organions (Clearly s directionally drilled, give	subsurface location	ns and measured and true	e vertical depth	s for all markers and	zones perti-
nent to this work.) *		stivo inicot	ion as follows:		***	
			cion as follows:		1	
RIH w/oversh	ot and pull pkr.	RIH w/3 3	3/4" bit and cle	an out cs	g to 4085'	
manua Dili	/2 2/0" bloctic	coated the	and new 4 1/2 N	-4 UKL air	J SEL PILL	
at 3850'. C	irc. pkr fluid.	lest csg (	to 500# for 30 m	THUCCS	200	
injection.						
			•			
		· . ·	· .		•	
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		. **				
$\bigwedge$		<u> </u>				
	Λ		,			
18. I hereby deliff that the fore	galag is true and correct	م مرم	luction Clerk		DATE April 2,	1990
SIGNED MONDE	- russor	TITLE Prod	MOCTON CICIA		DATE CPLIE	
(This space for Federal or S	tate office use)					
APPROVED BY		TITLE			DATE	
CONDITIONS OF APPROVA	L, <b>I</b> F ANY:	* *				

DEPTILE PUR NUMBER

FOR RECORD ONLY \*See Instructions on Reverse Side