

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well gas well other

2. NAME OF OPERATOR
Marathon Oil Company

3. ADDRESS OF OPERATOR
P.O. Box 2409, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980 FSL & 1830 FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other) Reactivate Devonian	<input type="checkbox"/>		<input type="checkbox"/>

5. LEASE
NM-06531-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Lea Unit

8. FARM OR LEASE NAME
Lea Unit

9. WELL NO.
6

10. FIELD OR WILDCAT NAME
Devonian

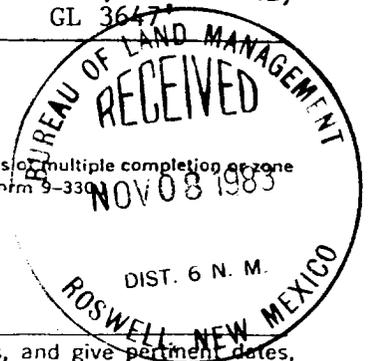
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec.11, T20S, R34E

12. COUNTY OR PARISH | 13. STATE
Lea | New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDR AND WD)
KB 3667' | GL 3647'

(NOTE: Report results of multiple completion or zone change on Form 9-330)



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.)*

On November 2, 1983 a Kobe submersible pump was installed in the Lea Unit Well No. 6. The pump was run on 2 7/8" tubing and set at 6031'. This well is presently being tested.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Thomas F. Zapatka TITLE Production Engineer DATE November 4, 1983

ACCEPTED FOR RECORD _____ (Space for Federal or State office use)

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:
MAY 8 1984

Carlsbad

ROSWELL, NEW MEXICO

*See Instr. II on Reverse Side

RECEIVED
MAY 10 1984
O.C.D.
HOBBS OFFICE