

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons
P.O. Box 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

5. Lease Designation and Serial No.

NMLC 06 8848

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

PRONGHOAN MANAGEMENT CORPORATION

3. Address and Telephone No.

P.O. BOX 1772 HOBBS N.M. 88241 505-393-9176

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

990' FNL - 1980' FEL
S19-T235-R33-E

8. Well Name and No.

MARSHALL FEDERAL #6

9. API Well No.

30-025-25151

10. Field and Pool, or Exploratory Area

CRUZ DELAWARE

11. County or Parish, State

LEA

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

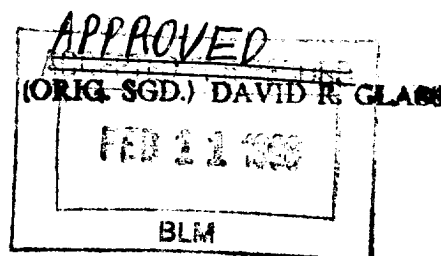
- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other RETURN WELL TO PRODUCTION (RWTP)
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(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.)*

CLEAN OUT WELL
RWTP - 5/1/98

RECEIVED
1998 JAN 29 P 2:00
BUREAU OF LAND MGMT.
HOBBS, NEW MEXICO



SEE ATTACHED FOR
CONDITIONS OF APPROVAL
FORTA

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

Signed *[Signature]*

Title *Partner*

Date *1/23/98*

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____