Submit 1 Copy To Appropriate District Office <u>District 1</u> – (575) 393-6161	State of New Mexic Energy, Minerals and Natural	Resources _	Form C-103 Revised July 18, 2013 WELL API NO. 30-015-42732 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No.			
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	OIL CONSERVATION D 1220 South St. Francis Santa Fe, NM 8750	IVISION 5 Dr.				
SUNDRY NOTICE (DO NOT USE THIS FORM FOR PROPOSAL DIFFERENT RESERVOIR. USE "APPLICA" PROPOSALS.)	BACK TO A	7. Lease Name or Unit Agreement Name Sterling 20 State				
,	as Well 🕅 Other		8. Well Number 002H			
2. Name of Operator Marathon Oi		9. OGRID Number 372098				
3. Address of Operator 5555 San Fe		10. Pool name or Wildcat				
Houston, TX		Purple Sage Wolfcamp				
4. Well Location						
Unit Letter P ::	240 feet from the FSL	line and 3	330 feet from the FEL line			
Section 20) Township 23S Range	e 28E	NMPM EDDY County			
	11. Elevation (Show whether DR, RF 3169	KB, RT, GR, etc.)				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data						
	PLUG AND ABANDON 🔲 🛛 R CHANGE PLANS 🔲 C	SUBS EMEDIAL WORK OMMENCE DRILI ASING/CEMENT				

CLOSED-LOOP SYS	ТЕМ													
OTHER:								OTHER	R:	Tubing excep	otion		2	X
13. Describe prop	osed	or c	ompleted	operations.	(Clearly	state	all p	ertinent	details,	, and give pert	inent dates,	including	estimated of	late
of starting an	/ proj	pose	d work).	SEE RULE	19.15.7.	14 NN	ЛАČ	. For M	ultiple	Completions:	Attach we	llbore diag	ram of	
proposed con	pleti	on o	r recompl	etion.					-					

Marathon Oil Permian is requesting a tubing exception for the Sterling 20 State 2H for 90 days.

NM OIL CONSERVATION

ARTESIA DISTRICT

UEU 06 2017

RECEIVED

Spud Date:

DOWNHOLE COMMINGLE

9/21/17

 \Box

Rig Release Date:

10/8/17

CASING/CEMENT JOB

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Gennifer Van Curen	TITLE Sr Regulatory	DATE 12/6/17
Type or print name Jennifer Van Curen	E-mail address: _jvancuren@marathonoil.com	PHONE: 713 296 2500
For State Use Only		
APPROVED BY:	AM IS	
APPROVED BY:	TITLE> 1471 M	DATE 12-6-17
Conditions of Approval (if any):		