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| Submit One Copy To Appropriate District Office | State of New Me | exico | TESIA O.C.D. | Form C-103 | |
| bmit One Copy To Appropriate District State of New Mexico fice Energy, Minerals and Natural Resources 25 N. French Dr., Hobbs, NM 88240 | | | Revised November 3, 2011 WELL API NO. | | |
| District II 811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION | | | 30-015-32118 | | |
| District III | 1220 South St. Francis Dr. | | | 5. Indicate Type of Lease STATE X FEE | |
| 1000 Rio Brazos Rd., Aztec, NM 87410Santa Fe, NM 87505District IVSanta Fe, NM 87505 | | | 6. State Oil & Gas Lease No. | | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | | 7. Lease Nam | e or Unit Agreement Name | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH | | | LITTLE BOX STATE | | |
| 1. Type of Well: Oil Well 🖾 Gas Well 🗌 Other | | | 8. Well Number 6 | | |
| 2. Name of Operator | | | 9. OGRID Number | | |
| MARATHON OIL PERMIAN, LLC 3. Address of Operator | | | 372098 10. Pool name or Wildcat | | |
| 5555 SAN FELIPE ST, HOUSTON, TX 77056 | | | LITTLE BOX CANYON (MORROW) | | |
| 4. Well Location | | | | | |
| | t from the \underline{S} line and $\underline{1}$ | | E_line DDY | | |
| | 0S_Range 21E_NMPN levation (Show whether DR | <u> </u> | | | |
| | 4427 | | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | | |
| NOTICE OF INTENT | TON TO: | SUBS | SEQUENT | REPORT OF: | |
| _ | | REMEDIAL WORK | | | |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB I | | | | | |
| | | | JOD L | J | |
| OTHER: | | | | nspection after P&A | |
| All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned. | | | | | |
| A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the | | | | | |
| <u>OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR</u> | | | | | |
| UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR | | | | | |
| PERMANENTLY STAMPED ON THE MARKER'S SURFACE. | | | | | |
| The location has been leveled as nearly | as possible to original gro | and contour and has b | been cleared of | all junk, trash, flow lines and | |
| other production equipment. | | | | | |
| Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with | | | | | |
| OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed | | | | | |
| from lease and well location. All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have | | | | | |
| to be removed.) | | | | | |
| All other environmental concerns have been addressed as per OCD rules. Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non- | | | | | |
| retrieved flow lines and pipelines. | | | | | |
| If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from the second well | | | | | |
| location, except for utility's distribution infr | astructure. | | | - /- /(e. 19 | |
| When all work has been completed, return this form to the appropriate District office to schedule an inspection. | | | | | |
| NA IN | | | | 0 | |
| SIGNATURE | TITLE E | vironmental Engineer | | DATE | |
| TYPE OR PRINT NAME Adrian Covarrubia | is E-MAIL | acovarrubias@mara | thonoil.com | PHONE: 713-296-3368 | |
| For State Use Only | | | | | |
| APPROVED BY: | TITLE | Stat . 1 | | DATE //11/19 | |
| ALLAVED BL. | <u> </u> | and ply | • | | |