

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

CISF  
4p

OIL CONSERVATION DIVISION

DISTRICT I  
P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO. 30-015-27861
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-10169
7. Lease Name or Unit Agreement Name STINKING DRAW
8. Well No. 3
9. Pool name or Wildcat S. DAGGER DRAW UPPER PENN ASSOCIATED

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 "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:  
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator

Marathon Oil Company

3. Address of Operator

P.O. Box 552, Midland, TX 79702

4. Well Location

Unit Letter D : 990 Feet From The NORTH Line and 990 Feet From The WEST Line

Section 36 Township 20 1/2-S Range 23-E NMPM EDDY County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
GL:3682 KB:3700

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

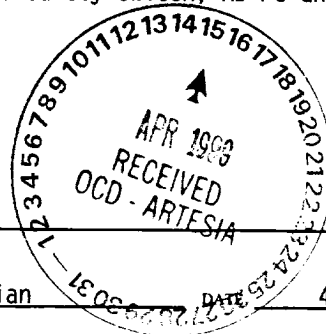
SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ADD PAY ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

MIRU PU. ND wellhead & NU BOP. POOH w/tbg. Set RBP, loaded & tested it. POOH w/sub pump & L/D. RU wireline & perfed from 7436'-7462', 7478'-7494', 7502'-7532', 7553'-7560', & 7726'-7756'. RD wireline. PU PPI tool and tally in hole. Set packer, dropped SV & FCV, and function tested. Unset packer & PUH treating pers w/15% HCl @ 75 gpf in 2' increments. POOH & L/D PPI tools. RIH w/RBP & set @ 2583'. Load & test to 500 psi. POOH w/tbg. RU CT & cable spoolers. RIH w/sub pump on 2-7/8" tbg. Landed tbg. Made final splice, ND BOP, & NU wellhead. Loaded tbg, checked high pressure safety switch, RD PU and turned well over to production on 3/14/99.



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

SIGNATURE Ginny Larke TITLE Engineer Technician

DATE 4/9/99

TYPE OR PRINT NAME Ginny Larke

TELEPHONE NO. 915-682-1626

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM  
DISTRICT II SUPERVISOR B6X

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

DATE 4-20-99

CONDITIONS OF APPROVAL, IF ANY: