Form 3160-5 (June 1990)

JNITED STATES DEPARTMENT OF THE INTERIOR

M. Oil Cons.	DIVISION FORM APPROVED (Budget Bureau No. 1904-0139
S M OII COMO.	Budget Bureau No. 1004-0139
The Charles	Expires: March 31, 1993
911 S. 1st Street	10 OQALease Designation and Serial No.

SUNDRY NOTICES AN	AND MANAGEMENT 911 S. 1919 2000 C. REPORTS ON WELLS Artesia, NM 8 21 or to deepen or reentry to a different reservoir.	0-2834Lease Designation and Serial No. NM 07260 6. If Indian, Allottee or Tribe Name
Use "APPLICATION FOR PERMIT - " for such proposals SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation INDIAN HILLS UNIT
1. Type of Well Oil Well Gas Well Zother 2. Name of Operator Marathon Oil Company 3. Address and Telephone No. P.O. Box 552 Midland, TX 79702 4. Location of Well (Footage, Sec., T., R., M., or Survey Des	915/682-1626 exciption)	8. Well Name and No. INDIAN HILLS UNIT #12 9. API Well No. 30-015-28813 10. Field and Pool, or exploratory Area INDIAN BASIN UPPER PENN ASSOCIATED POOL / DEVONIAN 11. County or Parish, State
SECTION 33, T-21-S, R-24-E 12. CHECK APPROPRIATE BOX(s)) TO INDICATE NATURE OF NOTICE, REPOR	EDDY NM
TYPE OF SUBMISSION	TYPE OF ACTION	ON
Notice of Intent X Subsequent Report Final Abandonment Notice	Abandonment Recompletion Plugging Back Casing Repair Altering Casing X Other MIT	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of mailtiple completion on Well Completion or Recompletion Report and Log form.)
give subsurface locations and measured and true verting 6/30/98 LINER TOP TEST - Drilled (pertinent details, and give pertinent dates, including estimated date of scal depths for all markers and zones pertinent to this work.)* Out to top of liner @ 9925', with 6-1/8"! Pressure held and was charted for 30 minu	starting any proposed work. If well is directionally drilled
	The second secon	
14. I hereby cerrify that the foregoing is too and correct Signed	Title Engineer Technician Title	Date