

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

c151
Op

OIL CONSERVATION DIVISION

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

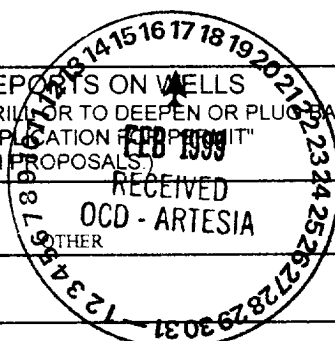
DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.	30-015-30535
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	V-992-3
7. Lease Name or Unit Agreement Name	IB "32" STATE
8. Well No.	3
9. Pool name or Wildcat	INDIAN BASIN 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	10. Elevation (Show whether DF, RKB, RT, GR, etc.) GL: 4207' KB: 4223'
2. Name of Operator Marathon Oil Company	
3. Address of Operator P.O. Box 552, Midland, TX 79702	
4. Well Location Unit Letter A : 950 Feet From The NORTH Line and 1250 Feet From The EAST Line Section 32 Township 21-S Range 24-E NMPM EDDY County	



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

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

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

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.

Work commenced 1/19/99. MIRU PU. NU BOPs. POOH w/ sub pump & RBP & L/D. RU wireline & perf 8202'-8222' w/4 spf. RD wireline. RIH w/PPI tools to 8310'. PUH treating perms w/50 gpf of 15% CCA Sour HCL acid from 8298'-8246' & 8222'-8202'. Pulled packer up above perms & set. Fished FCV & standing valve. Swabbed well. POOH w/tbg, L/D PPI packer & RIH w/RBP to 3200'. Loaded & tested RBP. POOH. PU sub pump & RIH to RBP. Released RBP & landed bottom of RBP @ 8399'. Made final splice & landed tbg on seaboard wellhead. ND BOPs & NU wellhead. RD PU. Work completed 1/24/99

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 2/10/99
TYPE OR PRINT NAME GINNY LARKE TELEPHONE NO. 915-682-1626

(This space for State Use)

APPROVED BY Jim W. Green TITLE District Supervisor DATE 3-3-99
CONDITIONS OF APPROVAL, IF ANY: