Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office District I – (575) 393-6161  Energy, Minerals and Natural Resources		Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
District II ~ (575) 748-1283 811 S. First St., Artesia, NM 88210 HOBBS OFIL	CONSERVATION DIVISION	30-025-09899
District III = (505) 334-6178	1220 South St. Francis Dr.	7. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Pe, Nivi 67303	7. State Oil & Gas Lease No.
87505		
SUNDRY NOTICE ENER I	REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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.)		Eumont Hardy Unit
1. Type of Well: Oil Well Gas Well Other WIW		8. Well Number 026
2. Name of Operator		9. OGRID Number
Mar Oil and Gas Corporation		151228
3. Address of Operator		10. Pool name or Wildcat
PO Box 5155 Santa	Fe, NM 87502	Eumont; Yates, 7 Rvrs, Queen
4. Well Location		
Unit Letter C: 660 feet from the North line and 1980 feet from the West line		
Section 5 Township 21S Range 37E NMPM Lea County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
100	ion (show whether 1214, 1412), 111, 614 etc	
		1 From the Control of
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
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NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING		
TEMPORARILY ABANDON		
PULL OR ALTER CASING		
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM		
OTHER: Return Well in injection	☐ OTHER:	
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date		
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of		
proposed completion or recompletion.		
Mar proposes to repair well by replacing packer and tubing and return to injection service		
Notifiy NMOCD prior to MIT and Chart		
Spud Date:	Rig Release Date:	
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
CICNATURE BUILDE	MATERIAL S	DATE 0/16/13
SIGNATURE Bully E. Prulu	TITLE Field Supervisor	DATE 8/15/13
Type or print name Billy E. Prichard	E-mail address: billy@pwllc.no	PHONE: 4329347680
For State Use Only	E-man address. Dmy@pwnc.m	FITOINE, 432734/000
- VI SMILE USE ONLY	Petroleum Engin	eer a a n nn12
APPROVED BY:	TITLE	DATE AUG 20 2013
Conditions of Approval (if any):	**************************************	