Submit 1 Copy To Appropriate District Office State of New Mexico	Form C-103
District I – (575) 393-6161 Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 OH. GONGEDNA TION DIVISION	WELL API NO. Multiple
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III - (505) 334-6178 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410	STATE 🗸 FEE 🗌
District IV – (505) 476-3460 Salita Fe, INIVI 8/303 1220 S. St. Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No.
87505 SUNDRY NOTICES AND 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.)	Black River 15 10 STATE COM
1. Type of Well: Oil Well Gas Well Other	8. Well Number Multiple
2. Name of Operator Marathon Oil Permian LLC	9. OGRID Number 372098
3. Address of Operator	10. Pool name or Wildcat
5555 San Felipe St., Houston, TX 77056	Multiple
4. Well Location	
Unit Letter : feet from the line and	feet from theline NMPM
Section 15 Township 24S Range 27E 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
11. Elevation (Snow whether DR, RRB, RT, OR, etc.	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB	
DOWNHOLE COMMINGLE	
CLOSED-LOOP SYSTEM	
OTHER: Request to commingle OTHER: OT	
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
Marathon Oil Permian LLC is requesting approval to commingle different pools on the lease. The value of the oil and gas will not be affected with	
the approval of this commingle request. Please see the attached pool commingle request. Wells will be accurately measured with daily measurement at separation. Notices have been mailed to all interest owners.	
Wells to be commingled:	
Name Location API	Pool Purple Sage; Wolfcamp (98220)
Black River 10 State Com 2H P-15-24S-27E (270 FSL & 1070 FEL) 30-015-42728 Black River 15 10 State Com X 5H P-15-24S-27E (270 FSL & 1010 FEL) 30-015-44070	Willow Lake, West; Bone Spring (96415)
Black River 15 10 State Com X 6H P-15-24S-27E (270 FSL & 1040 FEL) 30-015-44069	Willow Lake (West); Bone Spring (96415)
Spud Date: Rig Release Date:	
Accommend Approval, Subject Cike Approval Nusco infinite to the best of my knowledge and belief.	
I hereby certify that the information above is true and complete to the best of my knowled	ge and belief.
SIGNATURE TITLE CTR - Technician HES	DATE 10/25/2018
	marathonoil com 713-296-3368
Type or print name E-mail address:	PHONE:
For State Use Only	يرا ام
APPROVED BY: TITLE VICUM DATE DATE DATE	