

Submit 1 Copy To Appropriate District  
Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87414  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

HOBBSON OGD  
CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505  
AUG 30 2018  
RECEIVED

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. <b>30-025-09902</b>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <b>WIW</b>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <b>Mar Oil and Gas Corporation</b>		6. State Oil & Gas Lease No.
3. Address of Operator <b>PO Box 5155 Santa Fe, NM 87502</b>		7. Lease Name or Unit Agreement Name <b>Eumont Hardy Unit</b>
4. Well Location Unit Letter <b>F</b> : <b>1980</b> feet from the <b>North</b> line and <b>1980</b> feet from the <b>West</b> line Section <b>5</b> Township <b>21S</b> Range <b>37E</b> NMPM <b>Lea</b> County		8. Well Number <b>37</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number <b>151228</b>
		10. Pool name or Wildcat <b>Eumont; Yates, 7 Rvrs, Queen</b>

12. 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 ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER MIT ☒

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.

6/26/2018 NMOCD witnessed pressure test of tubing casing annulus  
Start 390 psig  
End 360 psig  
Duration 32 minutes

Spud Date:

Rig Release Date:

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

SIGNATURE

*Billy E. Prichard*

TITLE **Field Supvr**

DATE **08262018**

Type or print name **Billy E. Prichard** E-mail address: **billy@pwllc.net**

PHONE: **432-934-7680**

For State Use Only

APPROVED BY:

*Melvin Brown*

TITLE

*AO/I*

DATE

*9/4/2018*

Conditions of Approval (if any):