

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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

OIL CONSERVATION DIVISION

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO. <b>30-025-05913</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>Bertha Barber</b>
8. Well No. <b>8</b>
9. Pool name or Wildcat <b>Eumont; Yates, Seven Rivers</b>

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
2. Name of Operator <b>Marathon Oil Company</b>	
3. Address of Operator <b>P.O. Box 2490 Hobbs, NM 88240</b>	
4. Well Location Unit Letter <b>E</b> : <b>1980</b> Feet From The <b>North</b> Line and <b>660</b> Feet From The <b>West</b> Line Section <b>5</b> Township <b>20-S</b> Range <b>37-E</b> NMPM <b>Lea</b> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <b>GL 3558' KB 3569'</b>	

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: **Install plunger lift.** ☒

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.

5/18 RU pulling unit. RU wireline. RIH w/gauge ring to 2376'. GIH w/R plug. set at 2376'. POOH. RD wireline. ND wellhead. NU BOP. Rel on/off tool. Swab. Rel pkr. POOH. RIH w/ 2 3/8" tbg. ND BOP. Flange up well. RU wireline. Run tbg broach. ND wireline. Swab.  
5/20 Drop plunger. Swab. Plunger working OK.  
5/21 RD pulling unit.

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

SIGNATURE Kelly Cook TITLE Records Processor DATE 6/2/00

TYPE OR PRINT NAME Kelly Cook TELEPHONE NO. 393-7106

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: