Form 3160-5 (i-ovember 1994)

UNITY STATES DEPARTMENT A THE INTERIOR

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FORM APPROVED
Budget Bureau No. 1004-0135
Expires November 30 2000

BUREAU OF I. SUNDRY NOTICES Do not use this form for abanc'oned well. Use Formation in the supplier of the supplier is a supplier of the supplier in the supplier is a supplier in the supplier in the supplier is a supplier in the supplier in the supplier in the supplier in the supplier is a supplier in the supplier	5. Lease Serial No. NM-84652 6. If Indian, Allottee or Tribe Name				
	E - Other instructions on reverse side	7. If Unit or CA/Agreement, Name and/or No.			
1. Type of Well Oil X Gas Well Other 2. Name of Operator		8. Well Name and No. HAMON "A" FEDERAL 1			
Marathon Oil Company 3a. Address P.O. Box 552, Midland, TX 79702 4. Location of Well (Foolage, Sec., T., R., M., or Survey Descript)	3b. Phone No. (include area code) 915/687/8324 ion)	9. API Well No. 30-025-30881 10. Field and Pool, or Exploratory Area QUAIL RIDGE / MORROW			
UL "J", 1650' FSL, & 1980' FEL SEC 7, T-20-S, R-34-E	ATE POVIES TO INDICATE MATURE OF MOTION OFFICE	11. County or Parish, State LEA CO NM			
TYPE OF SUBMISSION	ATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPOR				
Subsequent Report Final Abandonment Notice 13. Describe Proposed or Coommpleted Operation (clear If the proposal is to deepen directionally or recomp Attach the Bond under which the work will be per following completion of the involved operations. If testing has been completed. Final Abandonment Nodetermined that the final site is ready for final inspectic	Alter Casing Fracture Treat Reclamate Casing Repair New Construction Recomple	water Shut-Off Well Integrity tee Other Toposed work and approximate duration thereof. tical depths of all pertinent markers and zones. absequent reports shall be filed within 30 days ew interval, a Form 3160-4 shall be filed once n, have been completed, and the operator has			
PROPOSE TO DEDICATE 40 ACRES N	W/4, SE/4				
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) WWK	Date 7/22/99	ENDENT			
Approved by	SPACE FOR FEDERAL OR STATE OFFICE USE	Date 4111 Om 100			
(ORIG. SGL). ALEXIS C. Conditions of approval, if any, are attached. Approval of certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations thereon.	SWOBODA PETROLLOM FNG	INEER JUL 27 1999			

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

District I

PO Box 1980, Hobbs, NM 88241-1980

District II

811 S. 1st Street, Artesia, NM 88210-2834

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

2040 South Pacheco, Santa Fe, NM 87505

¹ API Number

30-025-30881

State of New Mexico inerals & Natural Resources Department Energy

> OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

WELL LOCATION AND ACREAGE DEDICATION PLAT

² Pool Code

96637

Form C-102 Revised October 18, 1994 Instructions on back

Submit to Appropriate District Office State Lease - 4 Copies

³ Pool Name

BONE SPRINGS

EAST TEAS

Fee Lease - 3 Copies

AMENDED REPORT

⁴ Property	Code	5 Property Name 6 Well Num						Well Number				
		HAMON "A" FEDERAL COM #1										
7 OGRID	No.	8 Operator Name 9 Elevation						Elevation				
14021 Marathon Oil Company								_				
10 Surface Location												
UL or lot no.	Section	Township	Range	Lot. Idn		Feet from the		North/South Line	Feet from the	East/West line		County
	7	20-\$	24-E			1650		SOUTH	1980	EAST		LEA
Bottom Hole Location If Different From Surface												
UL or lot no.	Section	Township	Range	Lot. Idi	n Fe	et from the		North/South Line	Feet from the	East/W	est line	County
¹² Dedicated Acre	s ¹³ Joint	or Infill 14(Consolidation	1 Code	15 Order 1	No.			<u> </u>	<u></u>		
NO ALLO	WABLE V	VILL BE A	SSIGNED IONSTA	TO TH NDARI	IS COM	PLETION HAS BE	N UN	NTIL ALL INTE	ERESTS HAVE	BEEN N	CONS	OLIDATED
-			Ī								PEDTI	EICATION
	OPERATOR CERTIFICATION I hereby certify that the information contained here					contained herein is						
	1								true and complete	to the b	est of my k	nowledge and belief.
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	}											
		W.D. Queare										
									Signature			
		R. J. LONGMIRE										
}]		Printed Name					ı 				
			DRILLING SUPERINTENDENT Title				''					
	İ		ŀ						6/23/99			
	 			, ,					Date			
` `	, ,	`	` `	<u> </u>	\	- () 	18 SURVEYOR CERTIFICATION					
	İ		ľ			n		1	I hereby certify th	at the w	ell locatio	n shown on this plat
				i		l l			me or under my	supervisio	on, and t	ual surveys made by hat the same is true
	ļ		ľ	1		1/2	40	AC	and correct to the b	est of my l	belief.	
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k .	ĺ								Signature and Seal	of Profes	sional Surv	reyer:
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				LE	ase '	\						
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