

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 87410
District IV – (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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.)		WELL API NO. 30-025-42230
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Marathon Oil Permian LLC		6. State Oil & Gas Lease No. V084270001
3. Address of Operator 5555 San Felipe St., Houston, TX 77056		7. Lease Name or Unit Agreement Name ABE STATE
4. Well Location Unit Letter <u>A</u> : <u>240</u> feet from the <u>NORTH</u> line and <u>360</u> feet from the <u>EAST</u> line Section <u>32</u> Township <u>21S</u> Range <u>33E</u> NMPM County <u>LEA</u>		8. Well Number <u>3H</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3701' GL		9. OGRID Number 372098
10. Pool name or Wildcat WC-025 G-07 S213330F; BONE SPRING		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <u>TUBING DETAIL</u> <input checked="" type="checkbox"/>	

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.

10/15/2020: Pull existing Gas lift and tubing. Install 2 7/8" L80 tubing and gas lift. Set at 11,044'. Packer set at 11,029'.

Entered - KMS NMOCD

Spud Date:

10/11/2016

Rig Release Date:

10/31/2016

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

SIGNATURE



TITLE

Regulatory Professional

DATE

11/16/2020

Type or print name

Adrian Covarrubias

E-mail address:

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PHONE:

713-296-3368

For State Use Only

APPROVED BY:

TITLE

DATE

Conditions of Approval (if any):