Submit 1 Copy	To Appropriate District	S	Rec'd 11	ec'd 11/162020 - NMOCD Form C-103					
Office			inerals and N					evised July 18, 2013	
1625 N. French Dr., Hobbs, NM 88240						WELL API NO. 30-025-44163			
811 S. First St., Artesia, NM 88210 OIL CC			ONSERVATION DIVISION			5. Indicate Type of Lease			
1000 Pio Brozos Pd. Aztec NM 97410			O South St. Francis Dr.			STATE FEE 🗸			
<u>District IV</u> – (50 1220 S. St. Fran	Santa Fe, NM 87505			6. State Oil	& Gas Lease	No.			
87505 SUNDRY NOTICES AND REPORTS ON WELLS						7 Laga N	oma on Unit A	anagement Nama	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A						7. Lease Name or Unit Agreement Name DEE BOOT FEE 24 34 26 WXY			
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)									
1. Type of Well: Oil Well Gas Well 🗸 Other							8. Well Number 19H		
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						ANTELOPE RIDGE; WOLFCAMP			
4. Well Loc	ation A t Letter	271 fact fr	om the	ORTH	line and	1115	eet from the	EAST line	
Sec		Town		Range	34E	NMPM	Count		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)									
3446 GR									
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data									
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:									
								RING CASING	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB								^	
	COMMINGLE _								
CLOSED-LO OTHER:	OP SYSTEM			OTH	HER:	Т	ubing		
13. Desc	ribe proposed or com			all pertin	ent details, and	d give pertine	nt dates, inclu		
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.									
10/23/2020: Pull existing ESP and tubing. Install 2 7/8" L80 tubing and ESP. Set at 11,682'.									
				,					
Spud Date:	3/29/20	18	Rig Releas	e Date:	-	7/11/2018			
•			C	l					
T1 1				1		11 1: 0			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.									
SIGNATURE TITLE Regulatory Professional DATE DATE									
Adrian Covarrubias acovarrubias@marathonoi						arathanail as		712 206 2269	
Type or print	name	มเสร	E-mail add	dress:		ıarau10110II.CO	PHONE:	713-296-3368	
For State Use	<u>e Only</u>								
APPROVED BY: PM			_ _{TITLE} LM II			DATE 12/3/2020			
	Approval (if any):								