

Submit 1 Copy To Appropriate District  
Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88241  
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

State of New Mexico

Energy, Minerals and Natural Resources

Form C-103

Revised July 18, 2013

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO.

30-025-09899

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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 ☐ Gas Well ☐ Other **WIW**

2. Name of Operator

**Mar Oil and Gas Corporation**

3. Address of Operator

**PO Box 5155 Santa Fe, NM 87502**

4. Well Location

Unit Letter **C** : **660** feet from the **North** line and **1980** feet from the **West** line  
Section **5** Township **21S** Range **37E** NMPM **Lea** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

7. Lease Name or Unit Agreement Name

**Eumont Hardy Unit**

8. Well Number **26**

9. OGRID Number

**151228**

10. Pool name or Wildcat

**Eumont; Yates, 7 Rvrs, Queen**

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 360 psig

End 320 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@pwillc.net**

PHONE: **432-934-7680**

For State Use Only

APPROVED BY:

*Mary Brown*

TITLE

*AO/I*

DATE

*9/4/2018*

Conditions of Approval (if any):