| Office Copy | to Appropriate Distri | ct | State of N | New Me | xico | | | | | orm C-103 | |
|---|------------------------|-----------------------|---------------------|-----------------------------|----------|------------------------------|---|--|-------------------|-----------------|--|
| <u>District I</u> – (575 1625 N. French | Dr., Hobbs, NM 8824 | | , Minerals a | and Natu | rai Re | esources | WELL AI | | Revised | 1 July 18, 2013 | |
| District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CONS | | | | SERVATION DIVISION | | | 30-025-29908 5. Indicate Type of Lease | | | | |
| District III - (505) 334-6178 1220 1000 Rio Brazos Rd., Aztec, NM 87410 | | | 220 South | South 9.8 98 15 CD | | | | STATE FEE | | | |
| District IV = 1505) 476-3460 | | | | | | 6. State Oil & Gas Lease No. | | | | | |
| 1220 S. St. Fran 87505 | ncis Dr., Santa Fe, NN | i | ŧ | JUN 1:7 | 7201 | 9 | LG-2731 | | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS | | | | | | | | 7. Lease Name or Unit Agreement Name | | | |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DE TO PROPOSALS.) PROPOSALS.) | | | | | | | | TONTO 15 STATE | | | |
| 1. Type of Well: Oil Well Gas Well Other | | | | | | | | lumber 2 | | | |
| | Permian LLC | | | | | | 9. OGRII 372098 | | | | |
| 3. Address of Operator | | | | | | | | 10. Pool name or Wildcat N. AIRSTRIP BONE SPRING | | | |
| 5555 San Felipe St., Houston, TX 77056 4. Well Location | | | | | | | | N. AIRSTRIP BONE SPRING | | | |
| | t Letter | :fe | et from the | NORT | | line and | 550 | feet from | the | ASTline | |
| Sec | tion | | | | nge | 34E | NMPM | • | County | LEA | |
| | | 11. Elevati | on <i>(Show whe</i> | <i>ether DR</i> , 4013.5 | | RT, GR, etc. |) | | | | |
| | _ ,, | <u>-</u> | | | | | | | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | | | | | | | | |
| | NOTICE O | F INTENTION | TO: | | | SUE | SEQUEN | IT REP | ORT OF | : | |
| | REMEDIAL WOR | _ | ABANDON | | | IEDIAL WOF | | _ | | CASING 🔲 | |
| TEMPORARILY ABANDON | | | | | | | | _ | AND A | | |
| | TER CASING COMMINGLE | ☐ MULTIPLE | COMPL | | CAS | ING/CEMEN | II JOB | Ц | | PNR | |
| | OP SYSTEM | | | | | | | | | | |
| OTHER: | | | | | ОТН | | | | | | |
| 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. | | | | | | | | | | | |
| MIRU 5-30-2019 RDMO 6-10-19 | | | | | | | | | | | |
| 1. 5-31-19 to 6-5-19 – POOH with rods and tbg | | | | | | | | | | | |
| 2. 6-6-19 – Set CIBP @ 9450'. 3. 6-8-19 – Spot 35 sx on CIBP. Perf @ 6,500'. Pump 40 sx. Pressure test to 500#. | | | | | | | | | | | |
| 4. 6-9-19 - | - Tag TOC @ 6,255 | i'.Perf @ 3,450'. Pum | p 40 sx. Pressi | ure test to | 500#. | Тад ТОС @ 3, | 180'. Perf @ 2 | ,100'. Pum | p 40 sx. Pres | ssure test | |
| to 500#. 5. 6-10-19 —Perf @ 458'. Circulate up intermediate, unable to circulate around to the surface casing. Circulate cement from 458' to 100'. Perf @ | | | | | | | | | | | |
| 100'. Pump down 5 1/2" and up 8 5/8". Circulate cement from 100' to 0'. Verified visual. RDMO. DHM will be installed. | | | | | | | | | | | |
| P&A mud between all plugs. | | | | | | | | | | | |
| Closed loop all fluids to licensed facility. | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | ¬ | | г | , | | | 7 | | |
| Spud Date: | 5/2 ⁻ | 7/1987 | Rig Ro | elease Da | te: | | | | | | |
| | | | | | L | | | | | | |
| 11 1 41 | | 4. 1 | | | C | | 11.11.0 | • | | | |
| I hereby certif | y that the informa | ation above is true | and complete | e to the be | est of i | my knowledg | ge and belief | • | | | |
| SIGNATURE | Ali | | TITL | CTR-1 | Гесhni | ician HES | | DAT | 6/14/2019 | 9 | |
| SIGNATURE | | varrubias | 111L | | 200 | varruhiae@r | narathonoil c | com | 713-2 | 96-3368 | |
| Type or print name Adrian Covarrubias E-mail address: acovarrubias@marathonoil.com PHONE: 713-296-3368 | | | | | | | | | | | |
| For State Use | e Only | | | • | | ^ | 11 - | 1 | , | - | |
| APPROVED | BY: Keun | Jale | TITLE | E (m | mp) | ince O | Hum | DATI | _E 6 -2 | .H9 | |
| | Approval (if and |): <i>'</i> | | | 1 | | 7 | | | | |