

RECEIVED

DEC 18 2008

HOBBSON

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-025-06230

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Eumont Hardy Unit

8. Well Number 009

9. OGRID Number

151228

10. Pool name or Wildcat

Eumont; Yates, 7 Rvrs, Queen

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 D : 700 feet from the North line and 600 feet from the West lineSection 36 Township 20S Range 37E NMPM Lea County

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

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 ☐OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ P AND A ☒CASING/CEMENT JOB ☐OTHER: ☐

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Move in plugging rig 12/8/2009

Tag CICR at 3365ft x Displace well with gelled BW x Spot 25sx cmt x tag plug at 3190ft

Perf at 2600ft x squeeze with 35sx cmt x tag plug at 2490ft

Perf at 1425ft x squeeze with 35sx cmt x tag plug at 1320ft

Perf at 500ft x Circulate 200 sx cement to surface x cut off well head and install PA marker 12/11/2008

Spud Date:

Rig Release Date:

Approved for plugging of well bore only.
Liability under bond is retained pending receipt
of C-103 (Subsequent Report of Well Plugging)
which may be found at OGD Web Page under
Forms, www.emnrd.state.nm.us ocd.

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

SIGNATURE

Billy E. Prichard

TITLE Foreman

DATE 12/12/08

Type or print name

Billy E. Prichard

E-mail address: billy@pwlcc.net

PHONE: 432-934-7680

For State Use Only

OCD DISTRICT SUPERVISOR/GENERAL MANAGER

APPROVED BY:

Campbell Hill

TITLE

DATE

Conditions of Approval (if any):

DEC 19 2008