

District I 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720 District II 811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720 District III 1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170 District IV 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462	State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505	Form C-103 August 1, 2011 Permit 250877 <hr/> WELL API NUMBER 30-015-44374 <hr/> 5. Indicate Type of Lease P <hr/> 6. State Oil & Gas Lease No. <hr/> 7. Lease Name or Unit Agreement Name CYPRESS FEE 23 27 9					
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: O		8. Well Number 002H					
2. Name of Operator MARATHON OIL PERMIAN LLC		9. OGRID Number 372098					
3. Address of Operator 5555 San Felipe St., Houston, TX 77056		10. Pool name or Wildcat					
4. Well Location Unit Letter <u>L</u> : <u>1664</u> feet from the <u>S</u> line and feet <u>549</u> from the <u>W</u> line Section <u>9</u> Township <u>23S</u> Range <u>27E</u> NMPM _____ County <u>Eddy</u>							
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3159 GR							
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____							
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____ </div> <div style="width: 45%;"> SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> Other: <u>Perforations/Tubing</u> <input checked="" type="checkbox"/> </div> </div>							
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. Started Frac Prep operations on 01/08/18 Completed well with hydraulic fracturing treatment and Plug and Perf operations. Total interval from 9,797-14,305' for a total of 888 shots. Turn well to flowback on 03/24/18. Tubing Pressure to 1300 psi and Casing Pressure to 105 psi on 4/6/2018.							
Perforations							
Pool: FOREHAND RANCH; BONE SPRING , 24660 Location: -0- - 0 N 0 E							
TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount
Pool: PURPLE SAGE; WOLFCAMP (GAS) , 98220 Location: P -9-23S-27E 740 S 332 E							
TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount
9797	14305	Y	6	0.36	Sand	Frac	11954580
9797	14305	Y	6	0.36	Sand	Acid	22649
Pool: CARLSBAD; BONE SPRING, SOUTH , 9670 Location: -0- - 0 N 0 E							
TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount
Tubing							
PURPLE SAGE;WOLFCAMP (GAS) , 98220							
Tubing Size		Type		Depth Set		Packer Set	
2.875				9594		9583	
2.375				9594		9583	
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines <input type="checkbox"/> a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/>							
SIGNATURE		ELECTRONICALLY SIGNED		TITLE		DATE	
		<u>Melissa Szudera</u>		<u>Regulatory Compliance Representative</u>		<u>4/10/2018</u>	
Type or print name		E-mail address		Telephone No.			
		<u>mszudera@marathonoil.com</u>		<u>701-260-7272</u>			
For State Use Only:							
APPROVED BY:		TITLE		DATE			
		<u>Raymond Podany</u>		<u>Geologist</u>		<u>4/13/2018 12:55:29 PM</u>	

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State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Comments

Permit 250877

TUBING COMMENTS

Operator: MARATHON OIL PERMIAN LLC 5555 San Felipe St. Houston, TX 77056	OGRID: 372098
	Permit Number: 250877
	Permit Type: Tubing

Comments

Created By	Comment	Comment Date
acovarrubias	C-102, Directional, C-104, and C-105 will be sent via mail.	4/10/2018