

Submit to Appropriate District Office
 State Lease - 6 copies
 Fee Lease - 5 copies

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-101
 Revised 1-1-89

OIL CONSERVATION DIVISION
 P.O. Box 2088
 Santa Fe, New Mexico 87504-2088

DISTRICT I
 P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
 P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
 1000 Rio Brazos Rd., Aztec, NM 87410

API NO. (assigned by OCD on New Wells)
30-025-31335

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:
 DRILL RE-ENTER DEEPEN PLUG BACK

b. Type of Well:
 OIL WELL GAS WELL OTHER
 SINGLE ZONE MULTIPLE ZONE

2. Name of Operator
 Marathon Oil Company

3. Address of Operator
 P O Box 552, Midland, TX 79702

4. Well Location
 Unit Letter K : 2310 Feet From The south Line and 2310 Feet From The west Line
 Section 27 Township 21-N Range 37-E NMPM Lea County

7. Lease Name or Unit Agreement Name
 W.S. Marshall "B"

8. Well No.
 11

9. Pool name or Wildcat
 Drinkard Paddock

10. Proposed Depth
 5500'

11. Formation
 Paddock

12. Rotary or C.T.
 rotary

13. Elevations (Show whether DF, RT, GR, etc.)
 3411' GL

14. Kind & Status Plug, Bond
 Blanket/Current

15. Drilling Contractor
 Unknown

16. Approx. Date Work will start
 August 15, 1991

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	13-3/8"	48#	40'	redi-mix	surface
12-1/4"	8-5/8"	24#	1250'	100	surface
7-7/8"	5-1/2"	17#	5500'	300	surface

Propose to drill a 5500' Paddock oil well.
 All casing shall be run in accordance with regulations and by approved methods.
 The following BOP equipment will be applied:
 Surface Hole: 13-5/8", 2M annular to be function tested.
 Intermediate Hole: 11" 3M dual ram & annular with 3M choke manifold. Test rams to 3000 psi, annular to 1500 psi, choke to 3000 psi.
 H2S monitoring equipment, PVT & flow sensor to be rigged up at 1250'.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE [Signature] TITLE Drilling Superintendent DATE 7/22/91

TYPE OR PRINT NAME S. L. Atnipp TELEPHONE NO. 915/682-1626

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval Date Unless Drilling Underway.

Submit to Appropriate District Office
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State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-102
 Revised 1-1-89

OIL CONSERVATION DIVISION

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 Santa Fe, New Mexico 87504-2088

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

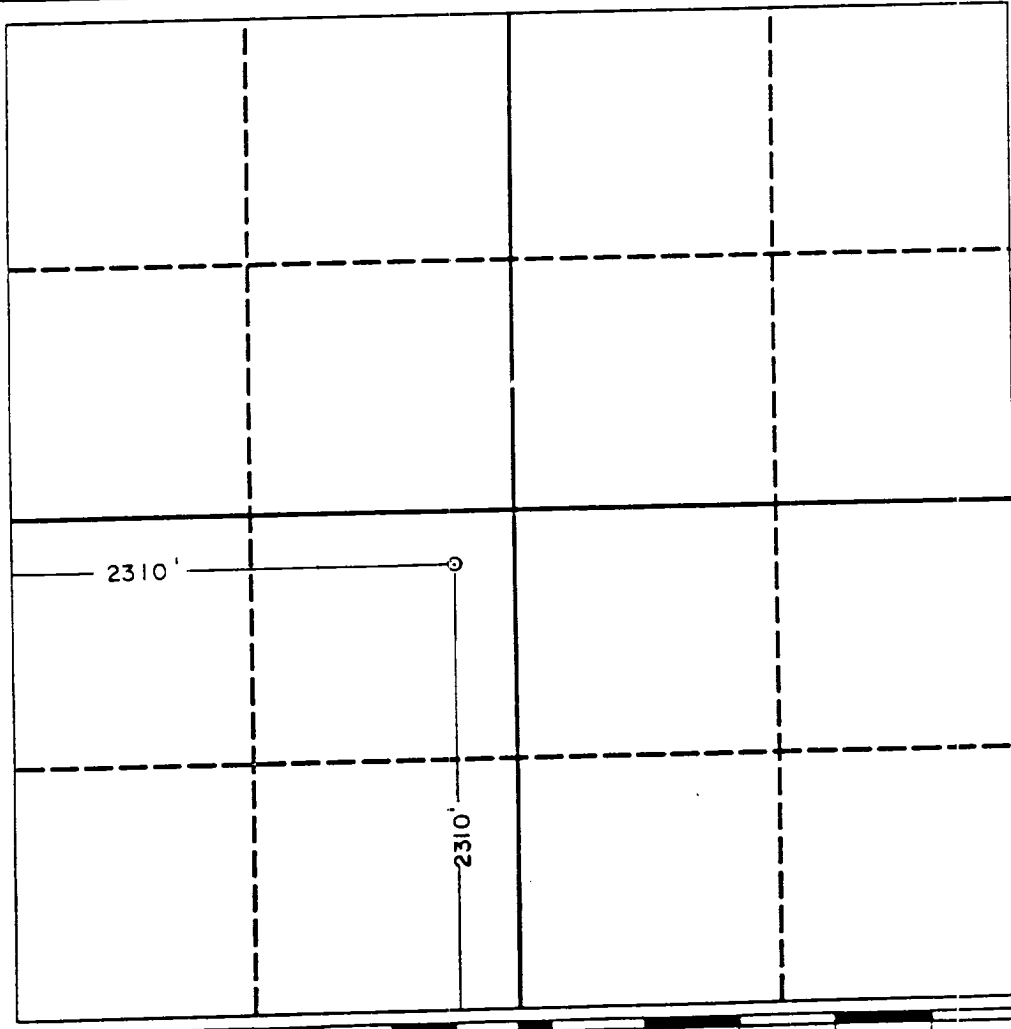
Operator MARATHON OIL CO.		Lease W.S. MARSHALL "E"		Well No. 11
Unit Letter K	Section 27	Township 21 SOUTH	Range 37 EAST	County LEA
Actual Footage Location of Well: 2310 feet from the SOUTH line and 2310 feet from the WEST line				
Ground level Elev. 3411.2	Producing Formation Paddock	Pool Drinkard Paddock	Dedicated Acreage: 40 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hatch marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?

Yes No If answer is "yes" type of consolidation _____

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature: *[Signature]*

Printed Name: **S. L. Atnipp**

Position: **Drilling Superintendent**

Company: **Marathon Oil Company**

Date: *[Signature]*

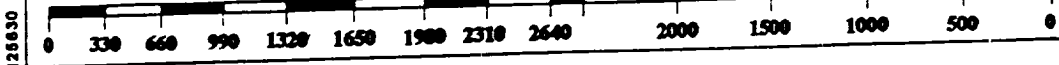
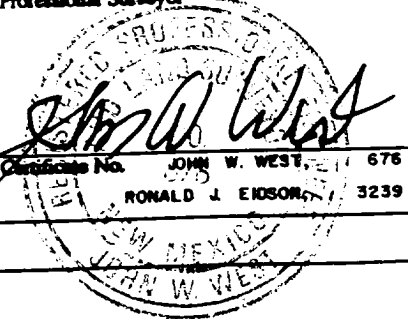
SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed: **7-8-91**

Signature & Seal of Professional Surveyor: *[Signature]*

License No. **JOHN W. WEST, 676**
RONALD J. EIDSON, 3239



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