

Submit 1 Copy To Appropriate District Office
District I – (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
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
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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.)		WELL API NO. 30-025-47046
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Marshall & Winston, Inc.		6. State Oil & Gas Lease No.
3. Address of Operator P. O. Box 50880, Midland, TX 79710-0880		7. Lease Name or Unit Agreement Name Loco Dinero 36 State Com 2L
4. Well Location Unit Letter <u>D</u> : <u>160</u> feet from the <u>North</u> line and <u>360</u> feet from the <u>West</u> line Section <u>36</u> Township <u>21S</u> Range <u>33E</u> NMPM County <u>Lea</u>		8. Well Number <u>4H</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3656' GR		9. OGRID Number <u>14187</u>
		10. Pool name or Wildcat WC-025 G-06 S213326D; Bone Spring

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Change Casing Depth <input checked="" type="checkbox"/>
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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.

Marshall & Winston, Inc. respectfully requests to change the intermediate casing depth. We are permitted to set 9.625" casing at 5863'. After further formation evaluation, the best decision is to adjust casing seat to 5670'. We will stay with the permitted 9.625" 40# HCP-110/HCL-80 casing design.

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 Todd Passmore TITLE Operations Manager DATE 02/03/21
Type or print name Todd Passmore E-mail address: tpassmore@mar-win.com PHONE: 432-684-6373
For State Use Only
APPROVED BY: _____ TITLE _____ DATE _____
Conditions of Approval (if any): _____

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CONDITIONS

Action 16831

CONDITIONS OF APPROVAL

Operator:	MARSHALL & WINSTON INC	P.O. Box 50880	Midland, TX79710	OGRID:	14187	Action Number:	16831	Action Type:	C-103Z
OCD Reviewer	Condition								
pkautz	None								