

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 May 27, 2004

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. 30-015-43096
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Black River 15 St. SWD
8. Well Number 1
9. OGRID Number 372098
10. Pool name or Wildcat SWD Cherry Canyon

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

2. Name of Operator  
Marathon Oil Permian, LLC

3. Address of Operator  
5555 San Felipe Houston, TX 77056

4. Well Location  
 Unit Letter K : 2334 feet from the S line and 1914 feet from the W line  
 Section 15 Township 24S Range R27E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3219

Pit or Below-grade Tank Application  or Closure

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

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

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.

- 2-13-2020 – NMOCD ok sqz 100sx down 4 1/2 tbg flush w/48.5BBL SIW/400psi.
- 2-14-2020 – Set 7" CIBP @ 3065' Circ w/P&A mud.
- 2-15-2020 – Tag CIBP w/tbg & press test to 500psi. Perf @ 2945' spot 60sx on CIBP @ 3065'. WOC & tag @ 2801' PUH to 1464' spot 25sx.
- Tag TOC @ 1315', perf @ 688' press to 1000psi.
- 2-17-2020 – OCD okayed to spot @ 738' cement to surf w/130sx. ND BOP. RDMO. RR. DHM to be installed.

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 OCD Web Page under Forms, www.emmrd.state.nm.us

P&A mud between all plugs closed loop all fluids to licensed facility.

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 NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE [Signature] TITLE Regulatory Specialist DATE 2/20/2020

Type or print name: Adrian Covarrubias E-mail address: acovarrubias@marathonoil.com Telephone No.: 713-296-3368  
**For State Use Only**

APPROVED BY: [Signature] TITLE Staff MGR DATE 4/3/20  
 Conditions of Approval (if any): \_\_\_\_\_