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SANTA FE		
FILE	- 1	-
u.s.G.s.		
LAND OFFICE		
OPERATOR	1	

## a arrest a

Form C-103 Supersedes Old C-102 and C-103

SANTA FE	NEW MEXICO OIL CONS	ERVATION COMMISSION	Effective 1-1-65	
FILE				
u.s.g.s.		KECEIVE	a. Indicate Type of Lease	
LAND OFFICE			State X Fee	
OPERATOR /	•	DEC 0 0 1075	5. State Oil & Gas Lease No.	
· ·		DEC 3 0 1975	L-5029	
SUNDRY (DO NOT USE THIS FORM FOR PROFUSE "APPLICATION	Y NOTICES AND REPORTS ON POSALS TO DRILL OR TO DEEPEN OR PLUG BON FOR PERMIT -" (FORM C-101) FOR SUC	ACK TO A DIFFERENT RESERVOIR		
1. OIL GAS X	OTHER•	ARTESIA, OFFICE	7, Unit Agreement Name	
2. Name of Operator	-		8. Farm or Lease Name	
Marathon Oil Company	/		State "27"	
3. Address of Operator			9. Well No.	
P. O. Box 2409, Hobbs	, New Mexico 88240		1	
4. Location of Well			10. Field and Pool, or Wildcat	
M	660 FEET FROM THE South	660	Wildcat	
	n 27 township 4S	RANGE 27E NMPM		
	15. Elevation (Show whether GL 3942'; KDB 39		12. County Chaves	
Check A	appropriate Box To Indicate N	lature of Notice, Report or Ot	her Data	
NOTICE OF IN	TENTION TO:	SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON  PULL OR ALTER CASING	PLUG AND ABANDON	REMEDIAL WORK  COMMENCE DRILLING OPNS.  CASING TEST AND CEMENT JOB  OTHER TEST MONTOYA FO	ALTERING CASING  PLUG AND ABANDONMENT  DYMATION	
OTHER				
<ol> <li>Describe Proposed or Completed Operator</li> <li>see Rule 1103.</li> </ol>		ails, and give pertinent dates, including	g estimated date of starting any proposed	

- 1. Perforated 5 1/2" casing 6464' to 6486' with 1 JSPF (22 holes).
- 2. Acidized perfs 6464-6486' with 2,200 gallons 15% HCl.

3.	Swab tested well. Well dry.
4.	Set 5 1/2" cast iron bridge plug at 6385'.
5.	Capped bridge plug with 40' cement plug.
6.	Tested plug with 3000#. Tested okay.
7.	Perfs 6464-6486' abandoned.
18. I here	by certify that the information above is true and complete to the best of my knowledge and belief.
STGNED	My Lyofunding Petroleum Engineer December 23, 1975
APPROVED	BY W. G. Supervisor, DISTRICT II DEC 3 0 1975
CONDIT	ONS OF APPROVAL, IF ANY: