

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

C15F  
6

DISTRICT I  
P.O. Box 1980, Hobbs NM 88241-1980  
DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210  
DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO.	30-015-29890
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Lease Name or Unit Agreement Name JAMES BUCHANAN "33" STATE
2. Name of Operator Marathon Oil Company	8. Well No. 1
3. Address of Operator P.O. Box 552, Midland, TX 79702	9. Pool name or Wildcat TRAVIS - UPPER PENNSYLVANIAN
4. Well Location Unit Letter <u>I</u> : <u>2000</u> Feet From The <u>SOUTH</u> Line and <u>660</u> Feet From The <u>EAST</u> Line Section <u>33</u> Township <u>18-S</u> Range <u>28-E</u> NMPM County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3545'	

11.

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

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐

12. 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.

SEE ATTACHED FOR DETAIL

PROPOSED TO DEDICATE THE E/2, SE/4 (80 ACRES) FOR TRAVIS-UPPER PENNSYLVANIAN POOL.

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

SIGNATURE Walter J. Longmire TITLE DRILLING SUPERINTENDENT DATE 3/5/99

TYPE OR PRINT NAME R. J. LONGMIRE TELEPHONE NO. 915/687-8356

(This space for State Use)

Jim W. Gurn

District Supervisor

APPROVED BY BLT TITLE  DATE 3-19-99

CONDITIONS OF APPROVAL, IF ANY: