

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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| WELL API NO. 30-015-30417 |
| 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. |
| 7. Lease Name or Unit Agreement Name FREEDMAN STATE |
| 8. Well No. 1 |
| 9. Pool name or Wildcat ILLINOIS CAMP - NORTH |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3606' |

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER | 2. Name of Operator Marathon Oil Company |
| 3. Address of Operator P.O. Box 552, Midland, TX 79702 | 4. Well Location Unit Letter C 750 Feet From The NORTH Line and 1860 Feet From The WEST Line Section 22 Township 18-SOUTH Range 28-EAST NMPM EDDY County |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3606' | |

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



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

SIGNATURE R. J. Longmire TITLE DRILLING SUPERINTENDENT DATE 1/15/99
TYPE OR PRINT NAME R. J. LONGMIRE TELEPHONE NO 915/687-8356

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

APPROVED BY Bix TITLE DATE 1-27-99
CONDITIONS OF APPROVAL, IF ANY