

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

C 15F
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OIL CONSERVATION DIVISION

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-015-30247
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 LIGHTFOOT STATE "20"
8. Well No. 1
9. Pool name or Wildcat WILDCAT - OIL
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3484 - KB, 3468 GL

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator Marathon Oil Company
3. Address of Operator P.O. Box 552, Midland, TX 79702	4. Well Location Unit Letter M : 810 Feet From The SOUTH Line and 660 Feet From The WEST Line Section 20 Township 19-S Range 28-E NMPM EDDY County
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.

PROPOSE TO ABANDON STRAWN AND RECOMPLETE IN THE WOLFCAMP AS PER THE ATTACHED PROCEDURE

RECEIVED
OCD ARTESIA

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 3/15/00
TYPE OR PRINT NAME R. J. LONGMIRE TELEPHONE NO. 800-351-1417

(This space for State Use)

Jim W. Green District Supervisor

APPROVED BY _____ TITLE _____ DATE 3-21-00
CONDITIONS OF APPROVAL, IF ANY: