

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

clst
Op

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.

30-015-20778

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

125480

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.)

7. Lease Name or Unit Agreement Name

City of Carlsbad

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

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

Carlsbad (Delaware)

4. Well Location

Unit Letter 0 : 1980 Feet From The East Line and 660 Feet From The South Line

Section 13 Township 22-S Range 26-E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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.

Fracture existing Delaware perfs.

On 5/20/92 MIRU POOH w/Rods & pump. Install BOP. Release tbg & pkr. Tag TD. Tallied out of hole. Acidize Delaware w/1600 gal 7 1/2% NEFE. Swabbed well back. Fraced Delaware 4595-4611' w/32,000 gallon gel & 55,000# 20/40 sand. POOH w/work string. Ran in hole w/tbg, rods, & pump. Hung well off and placed on test.

On 7/1/92 10 BOPD; 108 BWPD.

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

SIGNATURE

Thomas M. Price

TITLE

Adv. Eng. Tech

DATE

7/22/92

TYPE OR PRINT NAME

Thomas M. Price

TELEPHONE NO. 915/682-1626

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY

TITLE

DATE

JUL 29 1992

CONDITIONS OF APPROVAL, IF ANY: