Form 3160-5 (November 1994)

## . TED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

811	• 1	st S	Street	FORM APPRO	VED
Artos				REACH IN	

	ons. Division
811 <sup>-1</sup> .1st	OLI COL FORM APPROVED VIV
Artesia, NA	1 882 Di-2834 1996
	5. Lease Serial No.

SUNDRY NOTICES		NM01165				
Do not use this form for particles abandoned well. Use Form	6. If Indian, Allottee or Tribe Name					
SUBMIT IN TRIPLICATE -	7. If Unit or CA/Agreement, Name and/or No					
1. Type of Well Oil X Gas Well Other		, p <sub>red</sub> .		8. Well Name and Yates Federa		
2. Name of Operator  Marathon Oil Company		0, 2.	**			
3a. Address		3b. Phone No. (include grea		9. API Well No.		
P.O. Box 2490 Hobbs, NM 88240	30. Phone No. (Include pred	coue)	30-015-20926  10. Field and Pool, or Exploratory Area			
4. Location of Well (Footage, Sec., T., R., M., or Survey Descrip UL N, Sec. 8, T-20-S, R-29-E	ption)	3/4	1	East Burton   Morrow		
860' FSL &1980' FWL				11. County or Pari	sh, State	
				Eddy County	NM	
12. CHECK APPROPRI	IATE BOX(ES) TO IN	DICATE NATURE OF NO	TICE, REPORT,			
TYPE OF SUBMISSION			PE OF ACTION	<del></del>		
Notice of Intent	X Acidize	Deepen	Production	(Start/Resume)	Water Shut-Off	
	Alter Casing	Fracture Treat	Reclamation			
X Subsequent Report		岩	$\exists$	=	Well Integrity	
_	Casing Repair	New Construction	Recomplete	•	Other	
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporaril	y Abandon		
	Convert to Injection Plug Back Water Di			sposal		
following completion of the involved operations. If testing has been completed. Final Abandonment No determined that the final site is ready for final inspection  7/27 RU to acid stimulate. Pump  MeOH foamed with 60% Co2. R	fotices shall be filed only n.) 75 bb1s 2% KCL n	after all requirements, inc	luding reclamation,	have been complet	ed, and the operator has	
7/28 Turn well down sales line.						
7720 Tulli well down sales Tille.				<u> </u>		
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	and the second persons of the second			5		
	BLW					
14. I hereby certify that the foregoing is true and correct		Title				
Name (Printed/Typed)  Kelly Cook		Į	s Processor			
Kelly Ook		Date August 3	3, 2000			
' U THIS	S SPACE FOR FEDE	ERAL OR STATE OF	FICE USE			
Approved by		Title		Date		
Conditions of approval, if any, are attached. Approval of	of this notice does not wa	trant or oss				
certify that the applicant holds legal or equitable title to	those rights in the subje	ect lease Office				