Submit 3 Copies to Appropriate	State of New Me Energy, Minerals and Natural		ent Form C-103 Revised 1-1-89					
District Office <u>DISTRICT I</u> P.O. Box 1980, Hobbs NM 88241-1980 <u>DISTRICT II</u> P.O. Drawer DD, Artesia, NM 88210	OIL CONSERVATIO 2040 Pacheco Santa Fe, NM &	St.	WELL API NO. <u>30-015-25827</u> 5. Indicate Type of Lease STATE FEE					
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. LC-064391-b					
(DO NOT USE THIS FORM FOR PR	ICES AND REPORTS ON WEL OPOSALS TO DRILL OR TO DEEPER RVOIR. USE "APPLICATION FOR PER -101) FOR SUCH PROPOSALS.	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name INDIAN HILLS UNIT					
1. Type of Well: OIL WELL GAS WELL	OTHER OTHER	OCD RECEIVE						
2. Name of Operator	AC	ARTED	8. Well No.					
Marathon Oil Company		<u>``/A</u> ``	<u>#6</u>					
3. Address of Operator	الدخ	· · · · · · · · · · · · · · · · · · ·	9. Pool name or Wildcat					
P.O. Box 552, Midland, TX	79702	C. 01816	INDIAN BASIN UPPER PENN GAS POOL					
4. Well Location Unit Letter <u>N</u> : <u>560</u>	Feet From The SOUTH	Line and 155	0 Feet From The WEST Line					
Section 20		inge <u>24-E</u>	NMPM EDDY County					
	10. Elevation (Show whethe	er DF, RKB, RT, GR, etc.)						
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data								
			SEQUENT REPORT OF:					
		REMEDIAL WORK						
	CHANGE PLANS	COMMENCE DRILLING OPNS.						
PULL OR ALTER CASING		CASING TEST AND CE						
OTHER:		OTHER:						

-

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 FORM 3160-5 WHICH WAS SUBMITTED TO THE BLM 11/17/98. APPROVAL FOR THIS WORK BY THE OCD IS ALSO REQUIRED.

I hereby certify that the information above is trugand complete to the best of my knowl SIGNATURE Linny Lake	edge and belief. TITLE <u>Engineer Technician</u>	DATE	12/2/98
TYPE OR PRINT NAME Ginny Larke		TELEPHONE NO.	915/682-1626
(This space for State Use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	_ TITLE	DATE	

Form 3160-5 (November 1994)		TED STATES NT OF THE INTH	ERIOR	0711	38'8 COP	Budge	ORM APPROVED et Bureau No. 1004	4-0135
		LAND MANAGE		.03	DR'8 CQ.P' 456 789 7011 1998	5. Lease Seri	al No.	2000
	SUNDRY NOTICES	AND REPORTS	ON WELL	S 123	-36789		LC • 064391 • B	
	Do not use this form f	AND REPORTS or proposals to drill or to orm 3160-3 (APD) for su	re-enter an		6	6. If Indian, A	Ulottee or Tribe Na	une
	abandoned well. Use F	xm 3160-3 (APD) for st		DEC	1993	N .		
	SUBMIT IN TRIPLICAT	E - Other instructions or	reverse stoe	RECE	IVED 2	7. If Unit or (A/Agreement, Nar	me and/or No.
1. Type of Well				A - 0.00	RIESIA +			
Oil X Gas Well X Well	Other		10	A A	Jon /	8. Well Name INDIAN HI		#6
2. Name of Operator				512253	026181		LLS UNIT	#0
Marathon 0il Comp	any		1 24 Ph 1			9. API Well 1	-	
3a. Address P.O. Box 552 Mid	land TY 79702		915-682-	o. (include area o 1626	coue)	<u>30-015-25</u>		
4. Location of Well (Footage, Sec		tion)		****		10. Field and Pool, or Exploratory Area INDIAN BASIN UPPER PENN GAS		
UL "N", 560' FSL						POOL		
SECTION 20, T-21-	S, R-24-E					11. County or Parish, State		
								NM
12.		ATE BOX(ES) TO I						
TYPE OF SU	BMISSION			TY	PE OF ACTION			
X Notice of In	tent	Acidize		epen	Production	(Start/Resume)	Water Sh	ut-Off
		Alter Casing	🔲 Fra	cture Treat	Reclamatio	DO	Well Integ	rrity
Subsequent	Report	Casing Repair	Ne ⁻	w Construction	X Recomple	te	Other	
Final Ahan	lonment Notice	Change Plans	🗌 Plu	g and Abandon	Temporari	ly Abandon		
		Convert to Inject	ion 🗌 Plu	g Back	Water Dis	posal		
13. Describe Proposed or C	commpleted Orention (cle	I arly state all pertinent des plete horizontally, give s	ails including	estimated start	ing date of any or	poosed work an	d aporoximate du	ration thereof
following completion o testing has been compl determined that the final In reference to recomplete this 1999 and will b MIRU PU. POOH	which the work all be p f the involved contains. eted, Final Abactonment site is ready for final inspec Notice of Incide well and return be accomplished as w/tubing. RIH w/ but well on product	f the operation results in Notices shall be filed or ion.) nts of Noncompli it to productior follows: TCP guns. Corre	i a multiple c nly after all n i ance No. n. The w	ompletion or re equirements, inc 99-DW-49, ork will b	completion in a ne cluding reclamation Marathon Oi e completed	il Company in the fi	plans to rst quarter	operator has
					SUBJECT '	TO		
					LIKE APPF			
		,			BY STATE			
		3						
	-							
14. I hereby certify that the fore	using is true and correct		Title		· · · · · · · · · · · · · · · · · · ·			
Name (Printed/Typed)	4	, Karke		Engine	er Technici	an		
Ginny Larke	Jun	y made						
: 			Date	11/17/9				<u></u>
<u>_</u>	TH	S SPACE FOR FE				T.	<u></u>	
Approved by	June			IOLEUM I	ENGINEER		NOV 27	1998
Conditions of approval, if an certify that the applicant hole	is legal or coultable title i	o those rights in the su	warrant or C bject lease	ffice				
certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.								
Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.								