

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO. 30-015-32103
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-10169-3
7. Lease Name or Unit Agreement Name: Indian Hills Unit
8. Well No. 39
9. Pool name or Wildcat Indian Basin Upper Perm Associated

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 "K" : 1690' feet from the South line and 2026' feet from the West line Section 16 Township 21-S Range 24-E NMPM County Eddy	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4119'	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: Initial Completion <input checked="" type="checkbox"/>

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Work commenced 4/13/02. MIRU PU, ND wellhead, NU BOPs. RIH w/bit & scraper, tagged bottom @ 8847', pickled tbg w/750 gals. 15% HCl acid and reversed acid to pit. Circulated hole clean & POOH w/tubing. RIH & perf @ 8118'-8123', 8162'-8172', 8172'-8192', 8192'-8212', 8212'-8232', 8232'-8252', 8270'-8280', 8293'-8303', 8318'-8326', 8342'-8348', 8384'-8404', 8404'-8424', 8424'-8444', 8444'-8464', 8470'-8480' w/4 spf for a total of 876 holes. POOH w/perf equipment & RIH w/PPI equipment. Acidize 8118'-8480' w/22,700 gals. SEM 15% CCA sour acid using 2' spacing. Avg. breakdown psi - 1241 psi, avg. treating psi - 1020 psi & 2.15 bpm. RD acid company and fish valves, POOH w/PPI equipment. RIH w/ RBP& test. RIH w/sub pump on 3-1/2" tubing, setting RBP @ 8,827'. Made final splice & landed tbg in hanger. ND BOPs, NU wellhead and RD PU. Turned well over to production 4/20/02.

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

SIGNATURE *Ginny Larke* TITLE Engineer Technician DATE 5/17/02

Type or print name Ginny Larke Telephone No. 800-351-1417

(This space for State use)

APPROVED BY *[Signature]* ORIGINAL SIGNED BY **TIM W. GUM** DISTRICT II SUPERVISOR TITLE _____ DATE MAY 30 2002

Conditions of approval, if any: