

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

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

OIL CONSERVATION DIVISION

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

WELL API NO.
30-015-25255

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.
168130

7. Lease Name or Unit Agreement Name
DELTA FEE "B"

8. Well No.
1

9. Pool name or Wildcat
EAST CARLSBAD

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 ☒

GAS
WELL ☐

OTHER

2. Name of Operator
Marathon Oil Company

3. Address of Operator
P.O. Box 552 Midland, Tx. 79702

4. Well Location

Unit Letter B : 990 Feet From The NORTH Line and 1980 Feet From The EAST Line

Section 14

Township 22-S

Range 27-E

NMPM EDDY

County

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

GL 3082' KB 3110'

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: PLUG BACK AND RUN NEW CASING ☒

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.

MARATHON OIL CO. RECENTLY WORKED ON THIS WELL TO PLUG BACK AND RECOMPLETE. PLEASE FIND THE ATTACHED WELL HISTORY AND WELLBORE DIAGRAM WHICH DETAILS THAT WORK.

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

SIGNATURE Thomas M. Price TITLE Advanced Eng. Tech. DATE 2-16-93

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 FEB 23 1993

CONDITIONS OF APPROVAL, IF ANY: