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(une 1990) DEPARTMEN	TED STATES NT OF THE INTERIOR LAND MANAGEMENT	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No.
SUNDRY NOTICES AND REPORTS ON WELLS		NM-020500 6. If Indian, Allottee or Tribe Name
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. "Use "APPLICATION FOR PERMIT—" for such proposals		N/A
SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation N/A
I. Type of Well Oil Gas Well Other		8. Well Name and No.
2. Name of Operator		Ohio B Gov't 23 No. 2
Marathon Oil Company 3. Address and Telephone No.		30-045-27957
PO Box 2409 Hobbs, NM 88240 (505) 393-7106		10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		Basin Fruitland Coal
		11. County or Parish, State
1260' FSL & 1500' FWL Sec. 23, T-28-N, R-11-W		San Juan, New Mexico
2. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPOF	RT, OR OTHER DATA
TYPE OF SUBMISSION	· TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
Subsequent Report	Plugging Back	Non-Routine Fracturing Water Shut-Off
Final Abandonment Notice	Casing Repair Altering Casing	Conversion to Injection
	L_I Other	Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
13. Describe Proposed or Completed Operations (Clearly state a	I pertinent details, and give pertinent dates, including estimated date of starting	
give subsurface locations and measured and true vertice	al depths for all markers and zones pertinent to this work.)*	
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Marathon Oil Company respectf Ohio "B" Government 23 No. 2	ully requests permission to temporarily as follows:	φ % Θ
1 777 /		REC E DCT I
	ump 35 ft. of cement with dump bailer. sig on surface. Hold pressure for 30 Release pressure.	RECEIVED BLM OCT 15 AM 10: 45 FARMINGTON, N
		VED AH IO: 45
16 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ROVAL EXPIRES NOVIIZAS	
HIS APPL		
77	OIL CON.	DIV.
2.5	\ DIST. 3	
14. I hereby certify that the foregoing is true and correct		· · · · · · · · · · · · · · · · · · ·
APJI	Guidry Tille Production Superintendent	A PIP FOR /YZED

Title .

(This space for Federal or State office use)