

RECEIVED
AUG 15 2008
CONSERVATION DIVISION
HOBBS OFFICE
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-24344 ✓
7. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
7. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name SFPRR ✓
8. Well Number 15 ✓
9. OGRID Number 151228 ✓
10. Pool name or Wildcat SWD; San Andres ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 type="checkbox"/> Other SWD ✓	
2. Name of Operator Mar Oil and Gas Corporation ✓	
3. Address of Operator PO Box 5155 Santa Fe, NM 87502	
4. Well Location Unit Letter B : 800 feet from the North line and 2121 feet from the East line Section 34 Township 9S Range 37E NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Replace packer and tbg <input checked="" type="checkbox"/>
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13. 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 recompletion.

Pull and replace packer and 2 3/8" IPC tbg
Notify Maxey Brown with NMOCD
Packer at 4919ft, Displace casing x tbg annulus with packer fluid
Pressure test casing x tbg annulus to 380psi for 30 minutes – OK
Return well to disposal service
Original C103 mailed 08052008

Original Pressure Chart Lost – Meter was calibrated 3/6/2008
Copy of pressure chart attached

Spud Date:

Rig Release Date:

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

SIGNATURE Billy E. Prichard TITLE **Foreman**

Date **8/13/08**

Type or print name **Billy E. Prichard** Email **billy@pwllc.net** PHONE **575-390-9100**

For State Use Only

APPROVED BY:

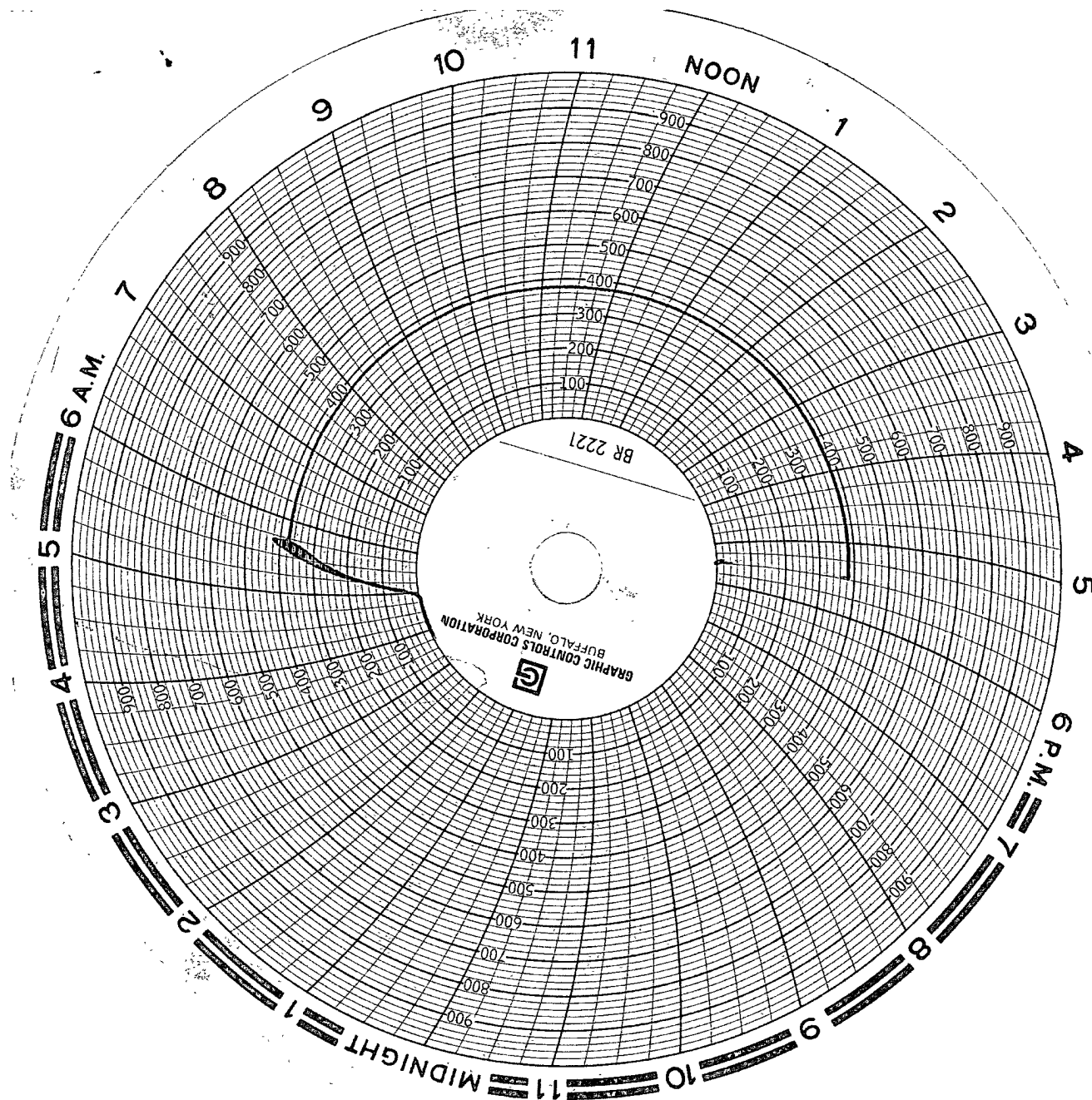
Chris Williams

OC DISTRICT SUPERVISOR/GENERAL MANAGER

DATE

AUG 18 2008

Conditions of Approval (if any):



Pressure chart
SFPRR # 15
Tested 08/04/2008
Original sent to NMOCD
Gandy Corporation Meter calibrated on 3/6/2008
Billy (Bill) E. Prichard