NO, OF COPIES RECEIVED					Form C-103	Old.		
DISTRIBUTION		transfer of c.c.c.				Supersed <b>es Old</b> C-102 and C-103		
SANTA FE		NEM WEXICO OIT CONS	Effective 1-	1-65				
FILE		JUL Zu	1 47 AM '6	7	5a. Indicate Ty	no of Lease		
U.S.G.S.					State X	Fee.		
LAND OFFICE					5. State Oil & C		<u></u>	
OPERATOR					1	384		
(DO NOT USE THIS FOR	IM FOR PROPOSALS TO DE	S AND REPORTS ON	SACK TO A DIFFEREN	T RESERVOJR.				
1. OIL X GAS OTHER-					7. Unit Agreeme	ant Name		
2. Name of Operator  Marathon Oil Company					8. Form or Lease Name Warn State A/C 2			
3. Address of Operator P.O. Box 220, Hobbs, New Mexico 88240					9. Well No.			
4. Location of Well F				1650	10. Field and F	Pool, or Wildow	,	
UNIT LETTER F 1650 FEET FROM THE NORTH LINE AND 1650 FEET FROM  THE West LINE, SECTION 6 TOWNSHIP 18 S RANGE 35 E NMPM.							III	
THEL	INE, SECTION	TOWNSHIP	RANGE	нмрм.			III	
	THITTINI I	5. Elevation (Show whether	DF, RT, GR, etc.	)	12. County		TTI.	
		GL	3976		Lea		7777	
16.	Check Appropria	te Box To Indicate N	Nature of Notice	ce, Report or Oth	er Data			
	E OF INTENTION			SUBSEQUENT		F:		
PERFORM REMEDIAL WORK	· ·	PLUG AND ABANDON	REMEDIAL WORK		ALT	ERING CASING		
TEMPORARILY ABANDON	า้		COMMENCE DRILL	ING OPNS.	PLUC	AND ABANDONMEN	,一	
PULL OR ALTER CASING	1	CHANGE PLANS	CASING TEST AND					
	•	<del></del>	OTHER	Aci	dized well		_ X	
OTHER								
			<u> </u>			6 - 4 - 4		
17. Describe Proposed or Con work) SEE RULE 1603.	mpleted Operations (Cl	early state all pertinent det	ails, and give pert	inent dates, including	estimatea aate c	j starting any pro	posea	
					/1 <b>!</b> !			
TD 6285'. PBTD 6252'. Treated Glorieta formation in								
casing perfs. with 3000 gals. 15% acid and 15 7/8" ball								
sealers. Max. press. 400 psi, Min. 0#, ISDP 0#. No ball								
action, avg. rate 5 bbls. PM.								
cc: CoPL; LHS; B	GH; File							
18. I hereby certify that the i	information above is tru	e and complete to the best	of my knowledge s	and belief.		······································		
A C	() I	7						
SIGNED ( SEAFOT)	Cesto	TITLE A	rea Supt.		. DATE	7-25-67		
	111	)						
APPROVED BY	1 (Xami	N TITLE			DATE	<u></u>		
CONDITIONS OF APPROVA	L. IF ANY:				<del></del> ,			