

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-6161 Fax:(575) 393-0720

District II
811 S. First St., Artesia, NM 88210
Phone:(575) 748-1283 Fax:(575) 748-9720

District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170

District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-101
August 1, 2011
Permit 269751

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

1. Operator Name and Address MARATHON OIL PERMIAN LLC 5555 San Felipe St. Houston, TX 77056		2. OGRID Number 372098
4. Property Code 325960		3. API Number 30-015-46200
5. Property Name SOUTHERN COMFORT 36 SB STATE		6. Well No. 004H

7. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
O	36	24S	28E		302	S	1734	E	Eddy

8. Proposed Bottom Hole Location

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
J	25	24S	28E	J	2563	S	2062	E	Eddy

9. Pool Information

WILLOW LAKE;BONE SPRING,WEST	96415
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Additional Well Information

11. Work Type New Well	12. Well Type OIL	13. Cable/Rotary	14. Lease Type State	15. Ground Level Elevation 2932
16. Multiple N	17. Proposed Depth 15972	18. Formation Bone Spring	19. Contractor	20. Spud Date 11/13/2019
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

☒ We will be using a closed-loop system in lieu of lined pits

21. Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
Surf	17.5	13.375	54.5	450	470	0
Int1	12.25	9.625	36	2650	786	0
Prod	8.75	5.5	20	15972	1444	0

Casing/Cement Program: Additional Comments

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22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
Annular	5000	2500	
Double Ram	5000	5000	
Pipe	5000	5000	
Blind	5000	5000	

23. I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify I have complied with 19.15.14.9 (A) NMAC ☒ and/or 19.15.14.9 (B) NMAC ☒ if applicable. Signature:	OIL CONSERVATION DIVISION
Printed Name: Electronically filed by Melissa Szudera	Approved By: Raymond Podany
Title: Regulatory Compliance Representative	Title: Geologist
Email Address: mszudera@marathonoil.com	Approved Date: 7/22/2019 Expiration Date: 7/22/2021
Date: 7/16/2019 Phone: 701-260-7272	Conditions of Approval Attached

State of Texas
Department of Taxation
Corporation Income Tax
Form 1041-ES
Estimated Tax
2004

Principal Office: SUNSHINE COMPANY, INC.
Address: 12345 MAIN ST., SUITE 100
City: SUNSHINE, TEXAS 75001
County: DALLAS
Zip: 75001

Estimated Tax: \$1,000.00
Estimated Tax Payments: \$1,000.00
Estimated Tax Refund: \$0.00

Signature: John C. Green
Date: 4/15/04

Preparer: John C. Green
Date: 4/15/04

Comments:

Notes:

Form 1041-ES (2004)

Instructions:

1. Estimated Tax. This form is used to estimate the tax liability for a corporation for the current year. It is required for corporations that expect to owe tax for the current year. The estimated tax liability is calculated based on the corporation's expected income for the current year. The estimated tax liability is then divided by 12 to determine the estimated monthly tax payment. The estimated monthly tax payment is then multiplied by 12 to determine the total estimated tax for the current year.

2. Estimated Tax Payments. The estimated tax payments are the amounts that the corporation expects to pay for the current year. These payments are made in 12 equal installments throughout the year. The estimated tax payments are subtracted from the estimated tax liability to determine the estimated tax refund.

3. Estimated Tax Refund. The estimated tax refund is the amount that the corporation expects to receive for the current year. It is calculated by subtracting the estimated tax payments from the estimated tax liability.

4. Signature. The form must be signed by the president or chief executive officer of the corporation. The signature must be dated.

5. Preparer. The form must be prepared by a qualified preparer. The preparer's name and date must be entered in the designated area.

6. Comments. The corporation may enter any comments or explanations in the designated area.

7. Notes. The corporation may enter any notes or additional information in the designated area.

8. Form 1041-ES (2004). This form is used to estimate the tax liability for a corporation for the current year. It is required for corporations that expect to owe tax for the current year. The estimated tax liability is calculated based on the corporation's expected income for the current year. The estimated tax liability is then divided by 12 to determine the estimated monthly tax payment. The estimated monthly tax payment is then multiplied by 12 to determine the total estimated tax for the current year.

9. Instructions. The instructions for this form are available on the Department of Taxation's website.

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Form APD Comments

Permit 269751

PERMIT COMMENTS

Operator Name and Address: MARATHON OIL PERMIAN LLC [372098] 5555 San Felipe St. Houston, TX 77056		API Number: 30-015-46200
		Well: SOUTHERN COMFORT 36 SB STATE #004H

Created By	Comment	Comment Date
acovarrubias	GCP, C-102, directional, and horizontal rule info will be sent via mail.	7/16/2019
ahvermersch	Fee Cancellation - Operator Called and stated that he accidentally hit the cancel button. Operator will resubmit.	7/16/2019

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Form APD Conditions

Permit 269751

PERMIT CONDITIONS OF APPROVAL

Operator Name and Address:		API Number:
MARATHON OIL PERMIAN LLC [372098]		30-015-46200
5555 San Felipe St.		Well:
Houston, TX 77056		SOUTHERN COMFORT 36 SB STATE #004H
OCD Reviewer	Condition	
rpodany	Will require a directional survey with the C-104	
rpodany	Cement is required to circulate on both surface and intermediate1 strings of casing	