

Sante Fe Main Office Phone: (505) 476-3441
General Information Phone: (505) 629-6116
Online Phone Directory <a href="https://www.emnrd.nm.gov/ocd/contact-us">https://www.emnrd.nm.gov/ocd/contact-us</a>

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

Form C-103 August 1, 2011
Permit 407162
WELL API NUMBER 30-015-57454
5. Indicate Type of Lease Private
6. State Oil & Gas Lease No.

**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: Gas	8. Well Number 702H																				
2. Name of Operator MARATHON OIL PERMIAN LLC	9. OGRID Number 372098																				
3. Address of Operator 600 W Illinois Ave, Midland, TX 79701	10. Pool name or Wildcat																				
4. Well Location Unit Letter <u>M</u> : <u>1009</u> feet from the <u>S</u> line and feet <u>336</u> from the <u>W</u> line Section <u>29</u> Township <u>22S</u> Range <u>27E</u> NMPM <u>      </u> County <u>Eddy</u>	7. Lease Name or Unit Agreement Name MAGELLAN WC FEE																				
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3167 GR																					
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>																					
Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____																					
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____																					
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data																					
<table border="0"> <tr> <td colspan="2">NOTICE OF INTENTION TO:</td> <td colspan="2">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>PERFORM REMEDIAL WORK</td> <td><input type="checkbox"/> PLUG AND ABANDON</td> <td><input type="checkbox"/> REMEDIAL WORK</td> <td><input type="checkbox"/> ALTER CASING</td> </tr> <tr> <td>TEMPORARILY ABANDON</td> <td><input type="checkbox"/> CHANGE OF PLANS</td> <td><input type="checkbox"/> COMMENCE DRILLING OPS.</td> <td><input type="checkbox"/> PLUG AND ABANDON</td> </tr> <tr> <td>PULL OR ALTER CASING</td> <td><input type="checkbox"/> MULTIPLE COMPL</td> <td><input type="checkbox"/> CASING/CEMENT JOB</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Other:</td> <td colspan="3">Other: <b>Spud</b> <input checked="" type="checkbox"/></td> </tr> </table>		NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:		PERFORM REMEDIAL WORK	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> REMEDIAL WORK	<input type="checkbox"/> ALTER CASING	TEMPORARILY ABANDON	<input type="checkbox"/> CHANGE OF PLANS	<input type="checkbox"/> COMMENCE DRILLING OPS.	<input type="checkbox"/> PLUG AND ABANDON	PULL OR ALTER CASING	<input type="checkbox"/> MULTIPLE COMPL	<input type="checkbox"/> CASING/CEMENT JOB	<input type="checkbox"/>	Other:	Other: <b>Spud</b> <input checked="" type="checkbox"/>		
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:																			
PERFORM REMEDIAL WORK	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> REMEDIAL WORK	<input type="checkbox"/> ALTER CASING																		
TEMPORARILY ABANDON	<input type="checkbox"/> CHANGE OF PLANS	<input type="checkbox"/> COMMENCE DRILLING OPS.	<input type="checkbox"/> PLUG AND ABANDON																		
PULL OR ALTER CASING	<input type="checkbox"/> MULTIPLE COMPL	<input type="checkbox"/> CASING/CEMENT JOB	<input type="checkbox"/>																		
Other:	Other: <b>Spud</b> <input checked="" type="checkbox"/>																				

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.

1/14/2026 Spudded well.

spud at 12pm

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan

SIGNATURE	<u>Electronically Signed</u>	TITLE	<u>Regulatory Supervisor</u>	DATE	<u>1/15/2026</u>
Type or print name	<u>Robyn M Russell</u>	E-mail address	<u>Robyn.M.Russell@conocophillips.com</u>	Telephone No.	<u>432-685-4385</u>
<b>For State Use Only:</b>					
APPROVED BY:	<u>Keith Dziokonski</u>	TITLE	<u>Petroleum Specialist A</u>	DATE	<u>1/20/2026</u>