Submit 1 Copy To Appropriate District Office District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	State of New Me Energy, Minerals and Natu OIL CONSERVATION 1220 South St. Fra Santa Fe, NM 8	ural Resources N DIVISION ncis Dr.	Form C-103 Revised July 18, 2013 WELL API NO. 30-015-44375 5. Indicate Type of Lease STATE FEE S 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.)			7. Lease Name or Unit Agreement Name Cypress Fee 23 27 9
1. Type of Well: Oil Well 🗴 Gas Well 🗌 Other		8. Well Number 003H	
2. Name of Operator Marathon Oil Permian LLC			9. OGRID Number 372098
3. Address of Operator 5555 San Felipe Rd Houston, TX 77057			10. Pool name or Wildcat Forehand Ranch; Bone Spring;
4. Well Location Unit Letter L : 1697 feet from the south line and 598 feet from the west line Section 9 Township 23S Range 27E NMPM Eddy County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3159 GR			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A COMMENCE DRILLING OPNS. PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB CASING/CEMENT JOB Image: CLOSED-LOOP SYSTEM Image: COMPL OTHER: Image: Closed or completed operations. Image: Clearly state all pertinent details, and give pertinent dates, including estimated date			
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. Well was spud on 10/11/2017.			
			ARTESIA DISTRICT OCT 19 2017
			RECEIVED
Spud Date: 10/11/2017	Rig Release D	ate:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE <u>Jennifer Va</u>	n Curan TITLE_Sr. R	egulatory Complianc	eDATE10/19/2017
Type or print name Jennifer Van Curen E-mail address: jvancuren@marathonoil.com PHONE: 713-296-2500 For State Use Only			
APPROVED BY: DATE /0-20-17 Conditions of Approval (if any):			