| Submit 1 Copy To Appropriate District Office                                                                                                                  |                                                                                    | State of New Mexico                                  |                                  |             |            | /                      |                                |                              | Ţ. F                            | Form C-10           | 03       |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|------------------------------------------------------|----------------------------------|-------------|------------|------------------------|--------------------------------|------------------------------|---------------------------------|---------------------|----------|--|
| <u>District I</u> – (575)                                                                                                                                     |                                                                                    | Energy,                                              | Minerals and                     | l Natural   | Resour     | ces                    | MATERIA A                      | DI NO                        | Revise                          | d July 18, 20       | 13       |  |
| <u>District II</u> – (575                                                                                                                                     | Dr., Hobbs, NM 88240<br>i) 748-1283                                                | OIL CONCEDUATION DIVIGIO                             |                                  |             |            |                        | WELL API NO.<br>30-015-45344   |                              |                                 |                     |          |  |
| 811 S. First St., .<br>District III – (50                                                                                                                     | Artesia, NM 88210<br>5) 334-6178                                                   | OIL CONSERVATION DIVISION 1220 South St. Francis Dr. |                                  |             |            | )N                     | 5. Indicate Type of Lease      |                              |                                 |                     |          |  |
| 1000 Rio Brazos                                                                                                                                               | Rd., Aztec, NM 87410                                                               | 12                                                   | Santa Fe, NM 87505               |             |            |                        |                                | ATE 7                        |                                 |                     | _        |  |
| District IV - (505) 476-3460 Santa Fe, INIVI 8/505  1220 S. St. Francis Dr., Santa Fe, NM  87505                                                              |                                                                                    |                                                      |                                  |             |            |                        | 6. State (                     | Oil & Gas                    | Lease No.                       |                     | :        |  |
|                                                                                                                                                               | SUNDRY NOTION                                                                      |                                                      |                                  |             |            |                        | 7. Lease                       | Name or U                    | Jnit Agree                      | ment Name           | :        |  |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) |                                                                                    |                                                      |                                  |             |            | Α                      | RICK DECKARD 4 WA STATE        |                              |                                 |                     |          |  |
| 1. Type of W                                                                                                                                                  |                                                                                    | Gas Well 🔽                                           | Other                            | •           |            |                        | 8. Well N                      | Number 2                     | н .                             |                     |          |  |
| 2. Name of Operator Marathon Oil Permian LLC                                                                                                                  |                                                                                    |                                                      |                                  |             |            |                        | 9. OGRID Number<br>372098      |                              |                                 |                     |          |  |
| 3. Address of Operator                                                                                                                                        |                                                                                    |                                                      |                                  |             |            |                        | 10. Pool name or Wildcat       |                              |                                 |                     |          |  |
| 5555 San Felipe St., Houston, TX 77056                                                                                                                        |                                                                                    |                                                      |                                  |             |            |                        | PURPLE                         | SAGE; WO                     | DLFCAMP                         | (GAS)               |          |  |
| 4. Well Location  Unit Letter  C  820  feet from the  NORTH  line a                                                                                           |                                                                                    |                                                      |                                  |             |            |                        | 1682                           | _feet from                   | the                             | ESTlin              | e        |  |
| Sect                                                                                                                                                          | ion 4                                                                              |                                                      | wnship 258                       |             |            | 8E                     | NMPM                           |                              | County                          | EDDY                |          |  |
| 医牙孔管学员                                                                                                                                                        | A Section 2 Section 2                                                              | 11. Elevatior                                        | (Show whether                    |             |            | GR, etc.)              |                                |                              | 11111                           |                     |          |  |
|                                                                                                                                                               |                                                                                    |                                                      | <del></del>                      | 3001' GL    | ·          | <u> </u><br>           |                                |                              |                                 |                     |          |  |
|                                                                                                                                                               | 12. Check A                                                                        | ppropriate I                                         | Box to Indic                     | ate Natu    | re of N    | <br> otice,            | Report or                      | Other D                      | ata                             |                     |          |  |
|                                                                                                                                                               | NOTICE OF IN                                                                       | LENTION -                                            | <b>Γ</b> Ο·                      | ı           |            | CLID                   | -<br>SEOHEN                    | IT DED                       | <b>○</b> □ ▼ ○ □                | <del>.</del> .      |          |  |
| PERFORM R                                                                                                                                                     | EMEDIAL WORK                                                                       | PLUG AND A                                           |                                  | 1   R       | FMEDIA     | L WORK                 | SEQUEN                         |                              |                                 | ·:<br>CASING [      | ٦        |  |
|                                                                                                                                                               | LY ABANDON                                                                         | CHANGE PL                                            |                                  |             |            |                        | LING OPN                       |                              | ANDA                            | _                   |          |  |
|                                                                                                                                                               | TER CASING                                                                         | MULTIPLE C                                           | OMPL [                           | ]   C.      | ASING/     | CEMENT                 | JOB                            |                              |                                 |                     |          |  |
|                                                                                                                                                               | COMMINGLE                                                                          |                                                      |                                  |             | Ì          |                        |                                |                              |                                 |                     |          |  |
| CLOSED-LOGOTHER:                                                                                                                                              | OP SYSTEM                                                                          |                                                      | Г                                | م ا ہ       | THER:      |                        | CO                             | MPLETIO                      | NS                              | Ţ.                  | 7        |  |
| of sta                                                                                                                                                        | ibe proposed or completing any proposed worked completion or reco                  | k). SEE RUL                                          | s. (Clearly sta<br>E 19.15.7.14) | te all pert | inent de   | tails, and<br>iple Con | give pertin                    | nent dates,<br>Attach we     | including<br>llbore diag        | estimated of        |          |  |
| AMMENDE                                                                                                                                                       | :D *                                                                               |                                                      |                                  |             |            |                        |                                |                              |                                 |                     |          |  |
| 11,429,887                                                                                                                                                    | 6/15/2019 - Started Frac<br>bs of 100 Mesh and 40/7<br>flowback and first oil prod | 70 sand. Stimula                                     | ted with 214 bbl                 | s of 15% H  | CI acid. Ţ | shots per total interv | foot for a tota<br>al from 963 | al 552 shots<br>4' - 14233'. | s, 0.36" in siz<br>7/13 - Ready | ze using<br>y Date. |          |  |
| 9/24/2040-                                                                                                                                                    | Install 2.7/0" I 90 tubing o                                                       | nd and lift value                                    | Cot at 0 5071 1                  | Daalaaaa    | -1.0.540   | ب کے مل                | ، الما                         | 1 -00.                       | A . 1                           |                     | •        |  |
| 0/31/2019.                                                                                                                                                    | install 2 7/6 Lou tubing a                                                         | no gas iiit vaives                                   | s. Set at 9,537°. I              | Packer set  | at 9,518   | The Ju                 | * Junary already               |                              |                                 |                     |          |  |
| 8/31/2019: Install 2 7/8" L80 tubing and gas lift valves. Set at 9,537'. Packer set at 9,518'                                                                 |                                                                                    |                                                      |                                  |             |            |                        | WIST Approved: RECEIVED        |                              |                                 |                     |          |  |
|                                                                                                                                                               |                                                                                    |                                                      |                                  |             |            |                        | 9/12/                          | 19                           | JAN                             | 3 0 202             | 0        |  |
|                                                                                                                                                               |                                                                                    |                                                      |                                  |             |            |                        |                                | eaa                          | NIPO                            | JON AE              | RTESIA   |  |
| Γ                                                                                                                                                             |                                                                                    |                                                      |                                  |             |            |                        |                                | <b>=</b> =4€                 | 0 00 0 60                       | الماليا لا          | · · COIP |  |
| Spud Date:                                                                                                                                                    | 4/2/2019                                                                           |                                                      | Rig Relea                        | ase Date:   |            | •                      | 6/9/2019<br>                   |                              |                                 |                     |          |  |
|                                                                                                                                                               |                                                                                    |                                                      |                                  |             |            |                        |                                |                              |                                 |                     |          |  |
| I hereby certify                                                                                                                                              | that the information a                                                             | bove is true ar                                      | nd complete to                   | the best o  | of my kņ   | owledge                | and belief                     | :                            |                                 |                     | ···      |  |
|                                                                                                                                                               | 1111                                                                               | <b>)</b>                                             |                                  |             |            |                        |                                |                              |                                 |                     |          |  |
| SIGNATURE_                                                                                                                                                    | Mill                                                                               | <u> </u>                                             | TITLE_                           | Regulatory  | Profess    | sional                 |                                | DAT                          | 1/29/202<br>E                   | .0                  |          |  |
| Type or print n For State Use                                                                                                                                 |                                                                                    | as<br>                                               | E-mail a                         | ddress: _   | acovarru   | bias@ma                | arathonoil.c                   | com<br>PHO                   | NE:                             | 96-3368             |          |  |
| •                                                                                                                                                             | <del></del>                                                                        |                                                      | لمسم                             | $\Lambda$   |            | 7                      | .1.0                           |                              |                                 |                     |          |  |
| APPROVED E                                                                                                                                                    | Approval (if any ACC                                                               | epted to                                             | r readily                        | One         | una        | 1/1/9                  | 5119                           | DAT                          | E                               |                     |          |  |
|                                                                                                                                                               |                                                                                    | MINOC                                                | ど                                |             | nece       | aves                   | •                              |                              |                                 |                     |          |  |