Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283		WELL API NO. 30-015-44567
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa PC, INIVI 67505	6. State Oil & Gas Lease No.
SUNDRY NO	FICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ICATION FOR PERMIT" (FORM C-101) FOR SUCH	Mariner Fee 23 28 20 WXY
1. Type of Well: Oil Well	Gas Well 🔳 Other	8. Well Number 11H
2. Name of Operator Marathon Oil Permian LLC.		9. OGRID Number 372098
3. Address of Operator		10. Pool name or Wildcat
5555 San Felipe St, Houston, TX	77056	Purple Sage; Wolfcamp
4. Well Location N	233	22 West
Unit Letter	:feet from the line and	feet from theline
Section 20	Township 23S Range 28E	NMPM County Eddy
	11. Elevation (Show whether DR, RKB, RT, GR, etc. 3075'	)
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
	NTENTION TO: SUB	SEQUENT REPORT OF:
		· · · · · · · · · · · · · · · · · · ·
TEMPORARILY ABANDON		
PULL OR ALTER CASING	MULTIPLE COMPL	т јов
CLOSED-LOOP SYSTEM		П
	pleted operations. (Clearly state all pertinent details, an	d 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.		
Marathon Oil Permian LLC. re 9.625" intermediate 1 casing v	spectfully requests a change to the originally permitted w veight from 40# to 36# due to a change in casing provide	ell casing. MOP requests to change the r. All other casing and cement
information remains the same	• • • •	
		NM OIL CONSERVATION ARTESIA INSTRICT
		MAR <b>U 5 201</b> 8
		RECEIVED
Spud Date:	Rig Release Date:	
I haraby cartify that the informatic	n above is true and complete to the best of my knowledge	re and baliaf
	' CONSISTENT AND COMPLETE TO THE DEST OF MY KNOWLEDG	
the	TITLE Regulatory Compliance Re	epresentative 03/01/2018
SIGNATURE		
Type or print name Melissa Szude	ra mszudera@mar E-mail address:	athonoil.com 713-296-3179 PHONE:
For State Use Only		
APPROVED BY:	200 TITLESTAT Mar	DATE 3-6-18
Conditions of Approval (if any):	Line Interior Plan	
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