

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004

RECEIVED
 OCT 26 2018
 DISTRICT II-ARTESIA O.G.D.

CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-27100
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-3772
7. Lease Name or Unit Agreement Name BR 15 St
8. Well Number 1
9. OGRID Number 372098
10. Pool name or Wildcat <i>Malaga, Delaware West</i>

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: Oil Well Gas Well Other

2. Name of Operator
Marathon Oil Permian, LLC

3. Address of Operator
5555 San Felipe Houston, TX 77056

4. Well Location
 Unit Letter L: +1650 feet from the S line and 660 feet from the W line
 Section 15 Township 24S Range 27E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3197 GR

Pit or Below-grade Tank Application or Closure

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>	
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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.

MIRU 10-17-18

- 10-18-18 – 25sx on existing CIBP @ 4315’.
- 10-19-18 – Tag TOC 4136’ CIBP set @ 2200’ w/30sx tag TOC 1900’. Perf @ 600’ Press to 1500psi.
- 10-20-18 – Cement to surf from 650’ w/100sx Verified. DHM to be installed.

ENTERED
[Signature]

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 NMOC guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE *[Signature]* TITLE CTR - Technician HES DATE 10/22/2018

Type or print name _____ E-mail address: _____ Telephone No. _____
For State Use Only

APPROVED BY: *[Signature]* TITLE STAFF MGR DATE 10-30-18
 Conditions of Approval (if any): _____