Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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	IESIA	OMB No. 1
	- ~	Expires: Inly

FORM A	PPROVE
OMB No.	1004-013

. BUR	EAU OF LAND MAN	IAGEIVIENI	UUN Z	Je nease Seriai No. ₹ 2009	NM-05551
Do not use this t		ORTS ON WELLS to drill or to re-enter ai APD) for such proposa	า	6. If Indian, Allottee of	or Tribe Name
1. Type of Well	T IN TRIPLICATE – Other	r instructions on page 2.		1	ement, Name and/or No. orth Indian Basin Unit
Oil Well Gas V	Vell Other		,	8. Well Name and No	orth Indian Basin #19
2. Name of Operator Marathon Oil	Company			9. API Well No.	30-015-28385
	Mail Stop #3308 77058	3b. Phone No. (include area co 713-296-3412	ode)	10. Field and Pool or South Dagge	Exploratory Area er Draw / Upper Pen Associate
4. Location of Well (Footage, Sec., T., UL 990' - 1,986' 'O'' FSL FEL	R.,M., or Survey Description Section 11, T 21-S, R 23-E	Latitude 32 48841 Longitude 104 57055		11. Country or Parish, U.S	State S.A. Eddy, New Mexico
12. CHEC	CK THE APPROPRIATE BO	OX(ES) TO INDICATE NATUR	E OF NOTIO	CE, REPORT OR OTH	ER DATA
TYPE OF SUBMISSION		TY	PE OF ACT	TION	
Notice of Intent	Acidize Alter Casing	☐ Deepen ☐ Fracture Treat	=	uction (Start/Resume) amation	☐ Water Shut-Off ✓ Well Integrity
Subsequent Report	Casing Repair Change Plans	New Construction Plug and Abandon		omplete porarily Abandon	Other
Final Abandonment Notice	Convert to Injection	Plug Back		er Disnosal	-

**Marathon Oil Company has completed operations to test the casing on the NIBU #19 well on 05/29/2009, at 0900hrs, for the attached charted period per "BLM" requirements and conditions of approval, for a prior request to T/A the above described well. Note, this well integrity test was witnessed by the assigned field personnel and "BLM" Inspector. Included for your review is the original 'Well Integrity Chart', and the most current wellbore, as left.

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has

After 10-28-09 the well must be online or plans to P & A must be submitted.

fictitious or fraudulent statements or representations as to any matter within its jurisdiction

determined that the site is ready for final inspection.)

Accepted for record

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)	
Rick R. Schell / rrschell@MarathonOil.com	Title Regulatory Compliance Representative
Signature Rick 3. School	Date 06/09/2009
THIS SPACE FOR FE	EDERAL OR STATE OFFICE USE
Approved by OD Whiteha	Title CPET Date 62409
Conditions of approval, if any, are attached. Approval of this notice does not warran that the applicant holds legal or equitable title to those rights in the subject lease whice entitle the applicant to conduct operations thereon.	tor certify ch would Office CFO
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for a	iny person knowingly and willfully to make to any department or agency of the United States any false

(Instructions on page 2)

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		The second secon	是是,他因此是"是我的",他可以是有的的"以后,你是是我们的,我们也没有是我们的"我们"的"我们",我们	Tubing 7,961' of 2 7	7/8" L-80, Ope	en Ended	
	CIBP Set @ 7454' with 10 of cement dump bailed on		1 N Y . 3				
	top CIBP Set @ 7674' With 10 Cement	0'			:: 7504-7612 '		
		T-2504. 146	III RANGERIAN	80'		7,750-7,812', 78	
					k, K-55 Set at acks, Circulat	8,100'. Cemented 186 sx.	ted to Su
Well Name & Number:	#REF!	tr.	Lease	#REF!			
Well Name & Number: County or Parish:		State/Prov.		#REF!	Country:	#REF!	
County or Parish:	#REF!	State/Prov.	#REF!	#REF!	Country:	#REF!	
County or Parish: Perforations: (MD)	#REF!			#REF!			
County or Parish: Perforations' (MD) Angle/Perfs	#REF! Angle @KOP and Depth	О	#REF! (TVD)	#REF!	Country:	#REF!	
County or Parish: Perforations: (MD) Angle/Perfs BHP: 0	#REF! Angle @KOP and Depth BHT 0	0 Completion Flui	#REF! (TVD)			0	
County or Parish: Perforations' (MD) Angle/Perfs	#REF! Angle @KOP and Depth	О	#REF! (TVD)	#REF!			

