

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-015-00255
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
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 Andrew Arnquist Est.
8. Well No. #1
9. Pool name or Wildcat Atoka Penn

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Marathon Oil Company
3. Address of Operator P. O. Box 552, Midland, TX 79702

4. Well Location Unit Letter <u>F</u> : <u>1650</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u> Line Section <u>29</u> Township <u>18-S</u> Range <u>26-E</u> NMPM <u>Eddy</u> County <u></u>
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3430' GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <u>Vent gas</u> <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <u></u> <input type="checkbox"/>

12. 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.

Marathon Oil Company respectfully requests permission to ^{Flare} vent gas to the atmosphere for the above referenced lease. The test would be conducted until a stabilized rate is obtained. The well made 6,388 MCF for the month of June, 1991.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE <u>[Signature]</u>	TITLE <u>Production Superintendent</u>	DATE <u>7/12/91</u>
TYPE OR PRINT NAME <u>J. R. Jenkins</u>		TELEPHONE NO. <u>915/682-1</u>
(This space for State Use)		
APPROVED BY <u>[Signature]</u>	TITLE <u>SUPERVISOR DISTRICT II</u>	DATE <u>AUG 7 1991</u>
CONDITIONS OF APPROVAL, IF ANY: <u>max 14 days</u>		

JUL 16 1961
 NORTH OCEAN