Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103
District I	Energy, Minerals and Natural Resources		Revised March 25, 1999 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	OIL CONSERVATION DIVISION		30-025-06224
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		STATE x FEE
1220 S. St. Francis Dr., Santa Fe, NM 87505	•		25104
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:  Eumont Hardy Unit
1. Type of Well: Oil Well Gas Well Other WIW			
2. Name of Operator			8. Well No. 13
Mar Oil and Gas Corp.			
3. Address of Operator P.O. Box 5155 Santa Fe NM 8750	12.		9. Pool name Eumont ( Yates – Seven Rivers- Queen)
4. Well Location			
Unit Letter H 1980 FNL, 660 FEL			
Section 36	Township 20S	Range 37E	NMPM County LEA
10. Elevation (Show whether DR, RKB, RT, GR, etc.)			
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR	K ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DR	ILLING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AI CEMENT JOB	ND 🗆
OTHER:		OTHER: MIT	x
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.			
MAR Oil & Gas Corp pulled the tubing and replace the packer and pressure tested annulus to 500 psig, pressure chart attached			
MAR is applying for a five year test			
Initiated water injection April 15, 200	<b>J4</b>		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE TITLE: VP Operations DATE: May 12, 2004			
Type or print name Duane C Winkle	r		Telephone No.505-989-1977
(This space for State use)			
APPPROVED BY Hay W. Wish OC FIELD REPRESENTATIVE II/STAFF MANAGER DAMY 2 4 2004			
Conditions of approval, if any			



