Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
<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 30-025-06225
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	7. Indicate Type of Lease
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410  1220 South St. Francis Dr.		STATE STATE STATE
D' + ' + TIT (505) 476 2460	Santa Fe, NM 87505	7. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM AUG 2 87505	<i>i</i> 2013	
	S AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROP <b>OSALE) VED</b> RILL OR TO DEEPEN OR PLUG BACK TO A		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		Eumont Hardy Unit
1. Type of Well: Oil Well Gas Well Other		8. Well Number 018
2. Name of Operator		9. OGRID Number
Mar Oil and Gas Corporation /  3. Address of Operator		151228 10. Pool name or Wildcat
PO Box 5155 Santa Fe, NM 87502		Eumont; Yates, 7 Rvrs, Queen
4. Well Location		
Unit Letter K : 198	30 feet from the South line and 1980	feet from the West line
Section 36	Township 20S Range 37E	NMPM Lea County
11 m	. Elevation (Show whether DR, RKB, RT, GR, etc.	
40 01 1		D 01 D
12. Check App	ropriate Box to Indicate Nature of Notice,	Report or Other Data
NOTICE OF INTE	NTION TO: SUB	SEQUENT REPORT OF:
TEMPORARILY ABANDON   C	HANGE PLANS 🔲 COMMENCE DR	ILLING OPNS. P AND A
PULL OR ALTER CASING M	ULTIPLE COMPL 🗌 CASING/CEMEN	IT JOB
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM	OTHER: Beturn	wall to production
OTHER:  13 Describe proposed or completed	I operations. (Clearly state all pertinent details, an	well to production  If give pertinent dates, including estimated date
	SEE RULE 19.15.7.14 NMAC. For Multiple Co.	
proposed completion or recomp		
MTRUSU 7/9/2013		
DO/CO to PBTD 3764'		
2 3/8"tbg landed at 3608'		
Install production equipment Waiting on electrical power		
waiting on electrical power		
Will file C104 when pump test comple	ted	·
Canad Datas	Pia Palassa Datas	
Spud Date:	Rig Release Date:	
I hereby certify that the information above	re is true and complete to the best of my knowledg	re and helief
Thereby certify that the information above	)	ge and benef.
1:06		7/- 2/-
SIGNATURE Belly E. Fre	TITLE Field Supervisor	DATE 8/23/13
Type or print name Billy E. Prichard	E-mail address: billy@pwllc.ne	PHONE: 4329347680
For State Use Only	2-man address. viny@pwnc.ne	FITONE: 432734/000
M. I. HI	1.	AG 12 0 - 0
APPROVED BY: Wat Why	TITLE Compliance Of	icer DATE 09-13-2013
Conditions of Approval (if any):	1	
		SEP 1 6 2013
	•	JL: # U 6010