Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I - (575) 393-6161	Energy, Minerals and Natural Resource	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 HO District II - (575) 748-1283	BBS OCD	20 025 0/2/5
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION		7. Indicate Type of Lease
District III - (505) 334-6178 AUG 2 7 2013220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410		STATE FEE
<u>District IV</u> - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	7. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(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.)		Eumont Hardy Unit
1. Type of Well: Oil Well Gas Well Other		8. Well Number 04
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		
	feet from the South line and 660	feet from the East line
Section 25	Township 20S Range 37I	
The state of the s	1. Elevation (Show whether DR, RKB, RT, GF	
12 Ok. 1 A	in Declaration of No.	Aire Barrett an Other Date
12. Check App	ropriate Box to Indicate Nature of No	tice, Report or Other Data
		SUBSEQUENT REPORT OF:
		<u>=</u>
TEMPORARILY ABANDON		
DOWNHOLE COMMINGLE	CASING/OL	IMEN 1 30B
CLOSED-LOOP SYSTEM		
OTHER:		eturn well to production
		ls, and give pertinent dates, including estimated date
of starting any proposed work).  proposed completion or recomp	SEE RULE 19.15.7.14 NMAC. For Multiple letion	le Completions: Attach wellbore diagram of
proposed completion of recomp	iction.	
MIRUSU 8/1/2013		
DO/CO to PBTD 3795'		
2 3/8"tbg landed at 3617' Install production equipment		
Waiting on electrical power		
Will El. C104 mkm man to the male		
Will file C104 when pump test comple	ted	
Spud Date:	Rig Release Date:	}.
		•
I hereby certify that the information about	ve is true and complete to the best of my know	vledge and belief.
n /	7	
SIGNATURE BULLY TO	TITLE Field Supervisor	DATE 8/23/13
Type or print name Billy E. Prichard For State Use Only	E-mail address: billy@pw	llc.net PHONE: 4329347680
MI I IST	11.	M
APPROVED BY: 1 Conditions of Approval (if any):	TITLE LOUPHANCE	ficer DATE 09-13-2013
Conditions of Approval (II any):	l	SEP 1 6 2013