

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

HOBBS OCD State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

APR 08 2014

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

RECEIVED Santa Fe, NM 87505

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.)		WELL API NO. 30-025-04435
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other WIW		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Mar Oil and Gas Corporation		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 5155 Santa Fe, NM 87502		7. Lease Name or Unit Agreement Name Eumont Hardy Unit
4. Well Location Unit Letter I : 3300 feet from the North line and 660 feet from the East line Section 1 Township 21S Range 36E NMPM Lea County		8. Well Number 042
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 151228
10. Pool name or Wildcat Eumont; Yates, 7 Rivers, Queen		

12. 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"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Failed attempt to return to production <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

All well fluids with be circulated to steel pit x No earthen pit will be constructed x any solids will be hauled to Sundance
 3/24/2014 Move in rigged up service unit x Attempt to return well to production
 Found 2 3/8 tbg inside collapsed casing at 3351ft
 3/28/2014 Rig down move out service unit
 Prepare C103 to plug and abandon

Spud Date: Rig Release Date:

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

SIGNATURE Billy E. Prichard TITLE Foreman DATE 4/3/14

Type or print name Billy E. Prichard E-mail address: billy@pwllc.net PHONE: 4329347680
 For State Use Only

APPROVED BY: Mary Brown TITLE Compliance Officer DATE 4/8/2014
 Conditions of Approval (if any):

APR 14 2014