

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

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised August 1, 2011

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-06216 ✓
5. Indicate Type of Lease STATE X FEE
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Eumont Hardy Unit ✓
8. Well Number 23 ✓
9. OGRID Number 151228
10. Pool name or Wildcat Eumont, Yates, 7 Rvrs, Queen

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.)	
1. Type of Well: Oil Well Gas Well <input type="checkbox"/> Other WIW	
2. Name of Operator Mar Oil and Gas Corporation ✓ JUN 29 2015	
3. Address of Operator PO Box 5155 Santa Fe, NM 87502 RECEIVED	
4. Well Location Unit Letter P : 660 feet from the South line and 660 feet from the East line Section 36 Township 20S Range 37E NMPM Lea County ✓	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input 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 xx
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input 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.

Mar proposes to pull injection equipment and repair and replace as needed to return well to injection service.
Notify NMOCD prior to MISU and prior to MIT after completion of well repairs

The Oil Conservation Division
MUST BE NOTIFIED 24 Hours
Prior to the beginning of operations

Condition of Approval: notify
OCD Hobbs office 24 hours
prior of running MIT Test & Chart

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

SIGNATURE Billy E. Prichard TITLE Field Supervisor DATE 6/24/15

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

APPROVED BY: Mary Brown TITLE Dist. Supervisor DATE 6/29/2015
Conditions of Approval (if any):

JUN 29 2015

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