Submit 3 Copies To Appropriate District Office	State of New Mexico				Form C-103		
District I	Energy, Minerals and Natural Resources			May 27, 2004 WELL API NO.			
1625 N. French Dr., Hobbs, NM 88240 District II	OIL CONGERNATION PROGRAM				30-025-08914		
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.			5. Indicate Type of Lease			
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505				FEE		
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Salita Fe, INWI 67303			6. State Oil & G	as Lease No.	A 2614	
87505 SUNDRY NOTICES AND REPORTS ON WELLS					7. Lease Name of	or Unit Agree	ement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A					/. Dease Name (	n Omit rigide	ment rame
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)					McDonald WN State		
1. Type of Well: Oil Well	Gas Well Other				8. Well Number 15		
2. Name of Operator	e of Operator  Marathon Oil Company ATTN: Donna Spears				9. OGRID Num		14021
3. Address of Operator					10. Pool name or Wildcat		
P.O. Box 3487 Houston, TX 77253 3487					Jalmat Tansill Y	ates Seven	Rvrs (79240)
4. Well Location	- · · · · · · · · · · · · · · · · · · ·	4 2		<del>УУ</del>			
Unit LetterL_	1,650feet from the	South S	line and _	_330	feet from the	West	line
Section 15	Township		Range	36-E	NMPM	Lea	County
	11. Elevation (Show)			GR, etc.)			
Pit or Below-grade Tank Application □ or Closure ☑							
Pit type_STEEL_Depth to Groundwat		st fresh water	well	D	istance from nearest s	urface water_	
Pit Liner Thickness: STEEL	mil Below-Grade Tank:	Volume	180	_bbls; C	onstruction Material	STEEL	
12. Check	Appropriate Box to l	Indicate N	ature of	Notice.	Report or Other	· Data	
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK							
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON	<u> </u>				<del>-</del>	P AND A	CASING 🗌
PULL OR ALTER CASING						1 7114571	23
OTHER:			OTHER:				
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.							
of recompletion.							
02/16/06 Notified NMOCD. MIRU Triple N rig #26 and plugging equipment, set steel pit. ND wellhead, NU BOP. RIH w/ CIBP @ 3,312'. SDFN.							
02/17/06 Circulated hole w/ mud, pumped 25 sx C cmt 3,312 – 3,162'. Perforated casing at 3,319'. RIH w/ packer, established rate, and							
squeezed 80 sx C cmt @ 3,319°. SD for weekend.							
02/20/06 Tagged cmt @ 2,800'. Perforated casing @ 1,620'. RIH w/ packer, established rate, & squeezed 60 sx C cmt @ 1,620'. WOC							
and tagged cmt @ 1,520'. Called RRC, Johnny, ok'd tag. Perforated casings @ 592'. RIH w/ packer, established rate, and squeezed 105							
sx C cmt @ 592'. WOC and tagge	d @ 480'. Perforated cas	sings @ 305	'. RIH w	/ packer,	SDFN.		
02/21/06 Squeezed 165 sx C cmt @ 305'. WOC and tagged cmt @ 175'. Perforated casing at 50'. Established rate and squeezed 115 sx							
C cmt 50' to surface. RDMO to M	arshall "B" #5.						
				A	1		
Cut off wellhead & anchors, install dryhole marker, backfill cellar.  Approved as to plugging of the Well Bore.							
Liability under bond is retained until surface restoration is completed.							
			`	ourace 16	storation is com	pleted.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-							
grade tank has been/will be constructed or observaccording to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.							
SIGNATURE TO THE SIGNATURE	<del>K</del>	_TITLE _	_engineer	, Triple N	Services, Inc	_ DATE	02/26/06
Type or print name James F. New	man, P.E.	E-mail add	ress: ::iim/	@trinlense	ervices comTe	lephone No	432,687 1994
For State Use Only		er dients	校的图代	<b>MINE HY</b>	STAFF WANAGE	MAR 0 6	2006
APPROVED BY:  Conditions of Approval (if any)	1.) 1. S. K	miest e				•	<del>-</del> -
Conditions of Approval (if any)	NUME	TITLE				DATE	
Conditions of Experience (if all the							