

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 87418
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources
HOBBS OCD
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised July 18, 2013

MAR 28 2018
RECEIVED

WELL API NO. 30-25-21687 ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name NEW MEXICO DB STATE ✓
8. Well Number 1 ✓
9. OGRID Number 372098 ✓
10. Pool name or Wildcat OSUDO; ATOKA (GAS)

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 Other

2. Name of Operator
Marathon Oil Permian LLC ✓

3. Address of Operator
5555 San Felipe St., Houston, TX 77056

4. Well Location
 Unit Letter B : 710 feet from the North line and 1980 feet from the EAST line
 Section 25 Township 20S Range 35E NMPM County LEA

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 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 <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: TEMPORARILY ABANDON <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.

Marathon Oil Permian, LLC notified the State 24 hr. prior to running MIT and is submitting successful MIT performed on 3/20/2018 which was witnessed by State representative. Please see attached.

Pressure test start 560 psi for 32 minutes, end with 560 psi.

✓
 This Approval of Temporary Abandonment Expires 3/20/2019

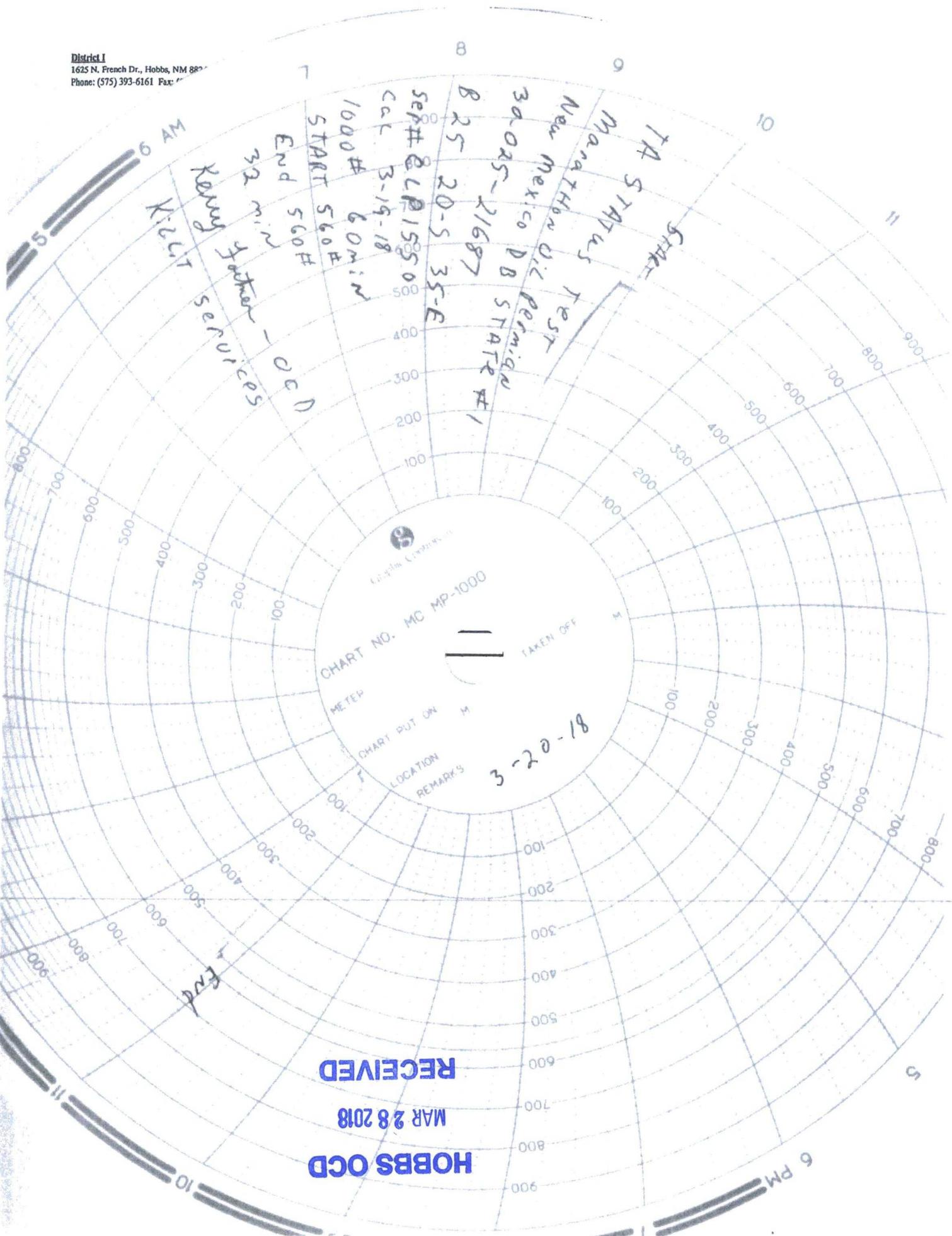
Spud Date: Rig Release Date:

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

SIGNATURE Jennifer Van Curen TITLE Sr. Regulatory Compliance Representative DATE 3/26/2018
 Type or print name Jennifer Van Curen E-mail address: jvancuren@marathonoil.com PHONE: 713-296-2500

For State Use Only
 APPROVED BY: Mary Brown TITLE AO/II DATE 4/4/2018
 Conditions of Approval (if any):

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-6162



RECEIVED

MAR 28 2018

HOBBS OCD

CHART NO. MC MP-1000

METER

CHART PUT ON

LOCATION

REMARKS

81-02-3

TA STATUS
MANATHON D.C. PERMIGAN
New Mexico DB STATE #1
B 25 20-5 35-E
SEP# 81550
CAL 3-19-18
1000# 60MIN
START 560#
END 560#
32 min
Kenny Johnson - OCD
Kilcut Services

6 PM

District 1
 1625 N. French Dr., Hobbs, NM 88240
 Phone: (575) 393-6161 Fax: (575) 393-0720

HOBBS OCD

MAR 28 2018

RECEIVED

State of New Mexico
 Energy, Minerals and Natural Resources Department
 Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name MARATHON OIL PERMIAN, LLC		API Number 30-025-21687-0000
Property Name NEW MEXICO DB STATE		Well No. 001

Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
B	25	20-S	35-E	710	N	1980	E	LEA

Well Status

TA'D Well <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	SHUT-IN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	INJECTOR INJ SWD	PRODUCER OIL GAS	DATE 3/20/18
--	--	---------------------	---------------------	-----------------

OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0			0	TA
Flow Characteristics					
Puff	Y / <input checked="" type="checkbox"/> N	Y / N	Y / N	Y / <input checked="" type="checkbox"/> N	CO2 _____
Steady Flow	Y / <input checked="" type="checkbox"/> N	Y / N	Y / N	Y / <input checked="" type="checkbox"/> N	WTR _____
Surges	Y / <input checked="" type="checkbox"/> N	Y / N	Y / N	Y / <input checked="" type="checkbox"/> N	GAS _____
Down to nothing	<input checked="" type="checkbox"/> / N	Y / N	Y / N	<input checked="" type="checkbox"/> / N	If applicable type
Gas or Oil	Y / <input checked="" type="checkbox"/> N	Y / N	Y / N	Y / <input checked="" type="checkbox"/> N	fluid injected for
Water	Y / <input checked="" type="checkbox"/> N	Y / N	Y / N	Y / <input checked="" type="checkbox"/> N	Waterflood

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <i>[Handwritten Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>BOB WAGGENER</i>	Entered into RBDMS
Title: <i>Production Supervisor</i>	Re-test
E-mail Address:	
Date: <i>3/20/2018</i>	Phone:
Witness: KERRY FORTNER-OCD 575-399-3221	