

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

HOBBS OGD  
 SEP 17 2018  
 RECEIVED

Form C-103  
 Revised July 18, 2013

WELL API NO. 30-025-44164
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name FLOWMASTER 24 34 15 TBU
8. Well Number 5H
9. OGRID Number 372098
10. Pool name or Wildcat RED HILLS, NORTH; BONE SPRING
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3520' GR

**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 D : 343 feet from the NORTH line and 1183 feet from the WEST line  
 Section 15 Township 24S Range 34E NMPM County LEA

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

<p style="text-align: center;"><b>NOTICE OF INTENTION TO:</b></p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>          TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>          PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/>          DOWNHOLE COMMINGLE <input type="checkbox"/>          CLOSED-LOOP SYSTEM <input type="checkbox"/>          OTHER: <input type="checkbox"/></p>	<p style="text-align: center;"><b>SUBSEQUENT REPORT OF:</b></p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>          COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/>          CASING/CEMENT JOB <input type="checkbox"/>          OTHER: Completions <input checked="" type="checkbox"/></p>
---	---

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.

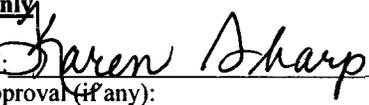
Started Frac Prep operations on 07/22/18. Completed well with hydraulic fracturing treatment and Plug and Perf operations. Total interval from 12,304' - 16,568', for a total of 810 shots. Turn well to flowback on 08/27/18.  
 Marathon Oil Permian LLC is requesting a tubing exception for this well.

Spud Date: 3/10/2018      Rig Release Date: 4/25/2018

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

SIGNATURE  TITLE CTR - Technician HES DATE 9/10/2018

Type or print name Adrian Covarrubias E-mail address: acovarrubias@marathonoil.com PHONE: 713-296-3368

**For State Use Only**  
 APPROVED BY:  TITLE Staff Mgr DATE 9-18-18  
 Conditions of Approval (if any): \_\_\_\_\_