

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
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. 30-025-25555 ✓
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" 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 SFPRR
4. Well Location Unit Letter G : 2000 feet from the North line and 1893 feet from the East line Section 33 Township 9S Range 37E NMPM Lea County		8. Well Number #022
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3974' GL		9. OGRID Number 151228
Pit or Below-grade Tank Application <input checked="" type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat Sawyer; San Andres; West
Pit type steel Depth to Groundwater 147ft Distance from nearest fresh water well > 1000ft Distance from nearest surface water > 1 mile		
Pit Liner Thickness: 12 mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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

NOTICE OF INTENTION TO: 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"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: 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: Job Cancelled <input checked="" type="checkbox"/>
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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.

Production equipment was pulled in preparation of horizontal lateral
Horizontal lateral for this well was cancelled
Pit was constructed and lined. Pit liner was removed and pit closed.
Pit was never used
Production equipment was re-installed and well returned to production.

RECEIVED
JUL 07 2008
HOBBS OCD

Intent to horizontal cancelled.

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 closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Billy E. Prichard TITLE Field Supervisor DATE 7/4/2008

-Type or print name **Billy (Bill) Prichard** E-mail address: billy@pwllc.net Telephone No. 575-390-9100
For State Use Only

APPROVED BY: Chris Williams TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE JUL 08 2008
Conditions of Approval (if any):