Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103 June 19, 2008
District I Energy,	Minerals and Natural Resources	WELL API NO.
1625 N. French Dr., Hobbs, NM RECEIVED District II	9 ONSERVATION DIVISION	30-025-31166
District III APR 1 7 2009 1	220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV HOBBSOCD	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
District IV 1220 S St. Francis Dr., Santa Fe, NM BBSOCD 87505		006433
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		7. Lease Name or Unit Agreement Name McDonald State A/C-1
PROPOSALS.) 1. Type of Well: Oil Well ☐ Gas Well 区	Other Injection Well	8. Well Number #42
2. Name of Operator		9. OGRID Number 14021
Marathon Oil Compar 3. Address of Operator	iy /	10. Pool name or Wildcat
5555 San Felipe Houston, Texas	77056 <u>Mail Stop</u> #3308	Eunice Seven Rivers Queens, South
4. Well Location		
Unit Letter G 1.340' feet from the North line and 2,630' feet from the South line		
Section 16 Township 22-S Range 36-E NMPM County Lea		
11. Elevation	on (Show whether DR,, RKB, RT, GR, etc. 3,563' GL	c.
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION		SSEQUENT REPORT OF: RK □ ALTERING CASING □
PERFORM REMEDIAL WORK 1 200 AND ADDRESS DANIE A		
TEMPORARILY ABANDON		
DOWNHOLE COMMINGLE		,
BOWINIOLE GOMMINIOLE	_	MALE CANDAD
OTHER:	OTHER: Active,	Water Injection Well (WIW).
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.		
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Marathon Oil Company shows operations for the above named well, MacDonald State AC-1, #42, as an active <u>Water Injecting Well.</u> **Please see attached production Data.		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE Cick 3. Compliance Representative DATE: 8-APR-2009		
Type or print name: Rick R Schell, E-mail address: RRSCHELL@MarathonOil.com, PHONE: 713-296-3412		
For State Use Only APPROVED BY: Conditions of Approval (if any): DISTRICT 1 SUPERVISOR DATE DATE		
<i>V</i>		

