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DISTRIBUTION			Form C-103 Supersedes Old
SANTA FE	HUBB	S OFFICE O. C. C.	C-102 and C-103
FILE			Effective 1-1-65
}	- JAN 12	2   02 PM '66	Sa. Indicate Type of Lease
LAND OFFICE	-		State X Fee
OPERATOR	-		5. State Oil & Gas Lease No.
SUND (DO NOT USE THIS FORM FOR P USE "APPLIC	RY NOTICES AND REPORTS ON W	VELLS CK TO A DIFFERENT RESERVOIR. PROPOSALS.)	
1. GIL X GAS WELL	OTMER.	· · ·	7. Unit Agreement Name
2. Dane of Operator			8. Farm or Lease Name
Marathon Cil Company			Section 35 State
3. Address of Operator			9. Well No.
<sup>B</sup> ox 220 H	obbs, N. M.		1
4. Location of Well		· · · · · · · · · · · · · · · · · · ·	10. Field and Pool, or Wildcat
UNIT LETTER	1980 FEET FROM THE South	660	Undesignated
THE West Line, sec-	10N 35 TOWNSHIP 78	BANGE 33E	
		· · · · · · · · · · · · · · · · · · ·	
	15. Elevation (Show whether D	)F, RT, GR, etc.)	12. County Roosevelt
Check	Appropriate Box To Indicate Na	ture of Notice. Report or Oth	er Data
NOTICE OF INTENTION TO:   SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JQB	
		OTHER	
OTHER			· · · · · · · · · · · · · · · · · · ·

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.

Well was drilled to total depth of 1450 (1405 PBTD) 12-22-65. R<sub>a</sub>n and set 127 joints  $5\frac{1}{2}$ ", 15.5# and 17#, 8R thd., J-55 new casing from 10.00' below KDB to  $1442 \cdot 12$  w/ last setting depth including Baker Flexflo collar 1.50' and Baker Guide Shoe .90'. The bottom 2 joints casing were Baker locked and the bottom 500' of casing covered with centralizers. The casing was cemented using 350 sacks cement. WOC 21; hours and tested casing with 1000# for 30 minutes, holding 0.K. A Temperature Survey indicated cement at 3295' outside the  $5\frac{1}{2}$ " casing. Preparing to perforate, treat and test.

CONDITIONS OF APPROVAL, IF ANY: