

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.

30-025-07244

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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

MARALO, INC.

3. Address of Operator

P. O. BOX 832, MIDLAND, TX 79702

7. Lease Name or Unit Agreement Name

BRADY M. LOWE "A"

8. Well No.

1

9. Pool name or Wildcat

BRONCO; WOLFCAMP, SOUTHWEST

4. Well Location

Unit Letter F : 1980 Feet From The NORTH Line and 1980 Feet From The WEST Line

Section 20 Township 13S Range 38E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3829' GR

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☒

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. 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.

PROPOSED PLUGGING PROCEDURE:

SET CIBP @ +/- 9650', CAP WITH 35' CEMENT.

CUT 5-1/2" 17# CASING @ +/- 7000'.

SPOT 100' (25 SXS) STUB PLUG @ +/- 7050'. WOC & TAG

SPOT 100' (25 SXS) PLUG @ 4590 - 4490' (SAN ANDRES)

SPOT 100' (25 SXS) PLUG @ 2385 - 2285' (SALT)

SPOT 100' (25 SXS) PLUG @ 468.50 - 368.50' ACROSS CASING SHOE.

SET 10 SX CEMENT PLUG @ SURFACE.

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

SIGNATURE Dorothea Logan

TITLE REGULATORY ANALYST

DATE JULY 27, 1998

TYPE OR PRINT NAME DOROTHEA LOGAN

TELEPHONE NO. (915) 684-7441

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY

TITLE

DATE

SEP 29 1998

CONDITIONS OF APPROVAL, IF ANY:

CARRY WITH
FIELD REP. II

bp