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U.S.G.S.
LAND OFFICE
OPERATOR

HOBBS OFFICE OF COMMISSION
NEW MEXICO OIL CONSERVATION COMMISSION

JAN 14 11 43 AM '66

Form C-103
Supersedes O-1
C-102 and C-104
Effective 1-1-66

5a. Indicate Type of Lease
State <input type="checkbox"/> Private <input checked="" type="checkbox"/>
5. 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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Marathon Oil Company	8. Name of Lessee J. M. Denton
3. Address of Operator Box 220 Hobbs, N. M.	9. Well No. 9
4. Location of Well UNIT LETTER <u>L</u> , <u>1080</u> FEET FROM THE <u>south</u> LINE AND <u>990</u> FEET FROM THE <u>West</u> LINE, SECTION <u>11</u> TOWNSHIP <u>15S</u> RANGE <u>37E</u> N.M.P.M.	10. Field and Pool, or Wildcat Denton Wolfcamp
11. Elevation (Show whether DF, RT, GR, etc.) 3796' CR	12. County Lee

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Temporarily abandoned

17. 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 is still temporarily abandoned. Tubing is still in well.

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

SIGNED [Signature] TITLE Area Supt. DATE 1-12-66

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: