	* <u>-</u>							
NO. OF COPIES RECEIVED			Form C-103 Supersedes Old C-102 and C-103					
SANTAFE	NEW MEXICO OIL CONSER	Effective 1-1-65						
FILE								
U.S.G.S.			5a. Indicate Type of Lease					
LAND OFFICE			State X Fee					
OPERATOR			5. State Oil & Gus Lease No.					
OFERATOR			B-1113					
(DO NOT USE THIS FORM FOR PROPO USE "APPLICATION	NOTICES AND REPORTS ON WE SALS TO DRILL OR TO DEEPEN OR PLUG BACK	ELLS (to a different reservoir. roposals.)						
1.			7. Unit Agreement Name					
OIL X GAS WELL	OTHER-							
2. Name of Operator	8. Farm or Lease Name							
Marathon	Warn State A/C 2							
3. Address of Operator	9. Well No.							
P.O. Box 240	8							
4. Location of Well	10. Field and Pool, or Wildcat							
UNIT LETTER N 221	Vacuum Abo							
UNIT LETTERNZZ.	A[[]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]							
THE South LINE, SECTION								
	12. County							
	Lea							
16. DF 3988' Lea Allility 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data								
NOTICE OF INT		SUBSEQUENT	REPORT OF:					
NOTICE OF INT	ENTION TO:	00001201						
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING					
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT					
PULL OR ALTER CASING	170 TT							
		OTHER Reperf. and acid	Ize x					
OTHER	[]							
			estimated date of starting any proposed					

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.

TD 8867'. PBTD 8818'. Perforated 5¹/₂" casing w/l hole/ft. at 8458, 8467, 8482, 8517, 8526, 8528, 8533, 8538, 8544, 8547, 8555, 8562, 8565, 8576, 8589, 8592, 8598, 8609, 8611, 8618, 8623, and 8627' (22 holes.).

Treated perforations in $5\frac{1}{2}$ " casing from 8458' to 8627' with 5000 gals. 15% regular acid. Used 50 7/8" RCN ball sealers. Maximum press. 2400 psi. Minimum press. 2100 psi.

Prior to adding perfs., treating, and installing artificial lift, this well flowed 66 BOPD. This work resulted in an increase of 46 BOPD.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.								
SIGNED C. A. Wilt	TITLE	Area	Supt.	DATE_	8-12-70			
APPROVED BY Hill Hill	TITLE		STRUT D	DATE_	<u> </u>			
CONDITIONS OF APPROVAL, IF ANY:		<i>,</i>						