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LAND OFFICE	
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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
2056

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator	8. Farm or Lease Name
Marathon Oil Company	State Section 30
3. Address of Operator	9. Well No.
P.O. Box 2409, Hobbs, New Mexico 88240	2
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER N 440 FEET FROM THE South LINE AND 2310 FEET FROM	Hobbs
THE West LINE, SECTION 30 TOWNSHIP 18-S RANGE 38-E N.M.P.M.	
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
3660' GR	Lea

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 JOBS <input type="checkbox"/>	
		OTHER Acidize Grayburg-San Andres zone. <input checked="" type="checkbox"/>	

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 4100'. Treated Grayburg-San Andres perforations 4076-80', 4091-93', 4099-4101', with 2000 gallons of 15% Unisol Acid and diverting agent.

Prior to stimulation this well was to be penalized to an allowable of 14 BOPD. As a result of this stimulation, the well will receive an allowable of 25 BOPD.

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

SIGNED <u>C. A. Ditt</u>	TITLE <u>Area Supt.</u>	DATE <u>12-20-71</u>
APPROVED BY <u>John W. Runyon</u>	TITLE <u>Asst.</u>	DATE <u>DEC 30 1971</u>
CONDITIONS OF APPROVAL, IF ANY:		