

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

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	
7. Unit Agreement Name	

8. Farm or Lease Name	
State Section 30	
9. Well No.	
9	
10. Field and Pool, or Wildcat	
Hobbs	
12. County	
Lea	

SUNDY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER-

2. Name of Operator
Marathon Oil Company

3. Address of Operator
P. O. Box 2409, Hobbs, New Mexico 8240

4. Location of Well
UNIT LETTER M 990 FEET FROM THE South LINE AND 990 FEET FROM
THE West LINE, SECTION 30 TOWNSHIP 18S RANGE 38E N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)
3651' GR

16. 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 CPNS. <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"/> Acidize

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 4277'. PBTD 4227'. Treated perfs. @ 4084' tp 4114' with 1000 gals.
15% Neet acid. Maximum press. 800 psi, minimum press. 200 psi. Average injection
rate 2 BPM. Well started producing 47 BO and 5½ BW in 24 hrs. on 3/4" choke with
FTP 125#.

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 8-12-70

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: