Submit 3 Copies To Appropriate District Office	State of	New Mo	exico		Form C-103
District I	nergy, Minerals and Natural Resources			Revised March 25, 1999	
1625 N. French Dr., Hobbs, NM 87240				WELL API NO.	
District II 811 South First, Artesia, NM 87210	OIL CONSERVATION DIVISION			30 025-29347	
District III	2040 South Pacheco			5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505			STATE XXX FEE	
2040 South Pacheco, Santa Fe, NM 87505	240 South Pacheco, Santa Fe, NM 87505			6. State Oil & Gas Lease No.	
	CEC AND DESCRIPTION			LG 2945	
DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.) 1. Type of Well:	CES AND REPORTS O SALS TO DRILL OR TO DEE CATION FOR PERMIT" (FOR	DEN OD DI	LIC DACK TO A	7. Lease Name of	or Unit Agreement Name:
Oil Well Gas Well XX Other				MARALO SV "16" STATE COM	
2. Name of Operator				8. Well No.	
MARALO, LLC				1	
3. Address of Operator P. O. BOX 832, MIDLAND, TX 79702				9. Pool name or	Wildcat
4. Well Location			REEVES; QUEEN, WEST		
Unit Letter L : Section 16	Township 10. Elevation (Show w	185 Ra	line and	NMPM LEA	m the WEST line
		3931'	GR		
11. Check A	ppropriate Box to Inc	dicate Na	ature of Notice 1	Conort or Other	Dete
NOTICE OF IN	I CIVITATIVA I CI.		SI IB	SEQUENT RE	Data
PERFORM REMEDIAL WORK	PLUG AND ABANDON	XX	REMEDIAL WORK	COCINI RE	PURT OF: ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRI		PLUG AND
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AN		ABANDONMENT
OTHER:					
12. Describe proposed or complete	d operations (Classic et		OTHER:		
 Describe proposed or complete of starting any proposed work). or recompilation. 	SEE RULE 1103. For 1	Multiple C	ompletions: Attach	ve pertinent dates, wellbore diagram	including estimated date of proposed completion
SEE ATTACHED PLUG AND ABAN	DON PROGNOSIS:				
APRIL 1, 2000 IS THE ESTIM		C THIS DO	DODOCED HODY		
		4 11115 11			
			# 10 (1) (1) # 10 (1) (2) # 10 (1) (2)	and the second of the second o	
I hereby certify that the information a	bove is true and complet	ta to the 1	oot of me 1		**************************************
	Legan	TITLE <u>r</u>	EGULATORY ANALYST		DATE MARCH 1, 2000
Type or print name DOROTHEA	LOGAN			Telenh	one No. 915.684.7441
(This space for State use)					one ito.
APPPROVED BY			the second	ra e	· .
Conditions of approval, if any:	T	TITLE			DATE
approval, it ally.			1 / 1		1775

TC.

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