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NEW MEXICO OIL CONSERVATION COMMISSION

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

SUNDRY NOTICES AND REPORTS ON WELLS <small>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. SEE APPLICATION FOR PERMIT - "A" (FORM C-101) FOR SUCH PROPOSALS.)</small>		5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. State Oil & Gas Lease No. 265
2. Name of Operator Marathon Oil Company		7. Unit Agreement Name - - -
3. Address of Operator P. O. Box 220, Hobbs, New Mexico		8. Farm or Lease Name Staplin State A/C 1
4. Location of Well UNIT LETTER <u>K</u> <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>30</u> TOWNSHIP <u>17S</u> RANGE <u>35E</u> NMPM.		9. Well No. 2
15. Elevation (Show whether DF, RT, GR, etc.) 3998' DF		10. Field and Pool, or Wildcat Vacuum
		12. County Lea

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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Shut well in	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input 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.			

Well shut in effective May 1, 1962.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u>[Signature]</u>	TITLE <u>Area Supt.</u>	DATE <u>11-1-66</u>
APPROVED BY _____ TITLE _____ DATE _____		
CONDITIONS OF APPROVAL, IF ANY:		