NO. OF COPIES RECEIVED			Form C-103 Supersedes Old
DISTRIBUTION			C-102 and C-103
SANTA FE	NEW MEXICO OIL CONS	SERVATION COMMISSION	Effective 1-1-65
FILE		•	
U.S.G.S.		* * * * * * * * * * * * * * * * * * *	Sa, Indicate Type of Lease
LAND OFFICE	]		State X Fac
OPERATOR	]		5. State Oil & Gas Lease No.
			B-2706
SUNDR	RY NOTICES AND REPORTS ON	I WELLS	
DO NOT USE THIS FORM FOR PROUBLE TAPPLICAT	OPOSALS TO DRILL ON TO DEEPEN OR PLUG FION FOR PERMIT -" (FORM C-101) FOR BU	SACE TO A DIFFERENT RESERVOIR. CH PROPOSALS.}	
OIL GAS			7, Unit Agreement Name
WELL X WELL	OTHER*		8. Farm or Lease Name
2. Name of Operator	-		State McCallister
Marathon Oil Comp	any		
3. Address of Operator	- 1r 1		9. Well No.
Box 220 Hobbs, N	evr Mexico		
4. Location of Well		3/70	Vacuum Blinebry &
UNIT LETTER N	990 FEET FROM THE South	LINE AND FEET FR	To any my It is set at a
i e e e e e e e e e e e e e e e e e e e			
THE West LINE, SECTI	10N 25 TOWNSHIP 17 S	5 RANGE NMF	·· (
	15. Elevation (Show whether	r DF, RT, GR, etc.)	12. County
	4002 GR		Lea ()))
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data			
NOTICE OF I	NTENTION TO:	SUBSEQUE	NT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
		OTHER	
OTHER			
		in the second se	ing estimated date of starting any proposed
17. Describe Proposed or Completed O work) SEE RULE 1103.	perations (Clearly state all pertinent de	tatis, and give pertinent dates, includ	ing estimated date of starting day proposed
To eliminate communication between the Blinebry and Glorieta			
zones, leaking tubing collars between the dual and single packers			
were replaced. Packer leakage test conducted and indicated			
zones no longer in communication. Work commenced February 25,			
1965 and was completed March 6, 1965.			
18. I hereby certify that the informatio	on above is true and complete to the best	of my knowledge and belief.	
18. I hereby certify that the informatio	n above is true and complete to the best	of my knowledge and belief.	
			3-11-65
18. I hereby certify that the informatio		of my knowledge and belief.  Ass <sup>‡</sup> t Area Supt	<b>3-11-</b> 65
			3 <del>-11-</del> 65

CONDITIONS OF APPROVAL, IF ANY: