

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

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.)		WELL API NO. 30-025-29941
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Marathon Oil Company		6. State Oil & Gas Lease No. K-5796
3. Address of Operator P.O. Box 552, Midland, Tx 79702		7. Lease Name or Unit Agreement State Section 17 Com
4. Well Location Unit Letter E : 1980 feet from the North line and 1980 feet from the West line Section 17 Township 17-S Range 35-E NMPM County Lea		8. Well No. 2
		9. Pool name or Wildcat North Vacuum Atoka-Morrow
10. Elevation (Show whether DR, RKB, RT, GR, etc.) GL 3982' KB 3311'		

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: Add Perforations In Existing Pay Zone <input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>

12. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Rig up slickline unit. Set blanking plug in on/off tool @ 11,900'. Rig down slickline unit. Rig up well service unit. Release tubing & POOH. Run packer and tubing conveyed perforating guns. Perforate Atoka (6 SPF) @ 11,852-66' (existing perfs @ 11,962-12,008'). Turn well flowing to system and test. Rig Down well service unit.

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

SIGNATURE Tim L. Chase TITLE **Advanced Engineer Technician** DATE **02-20-03**

Type or print name **Tim L. Chase** Telephone No. **915-687-8408**
(This space for State use)

APPROVED BY GARY W. WINK ORIGINAL SIGNED BY GARY W. WINK DATE MAR 04 2003
Conditions of approval, if any: OC FIELD REPRESENTATIVE II/STAFF MANAGER APPROVED BY GARY W. WINK