

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-025-32311

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-1113

7. Lease Name or Unit Agreement Name
WARN ST. A/C 1

8. Well No.
6

9. Pool name or Wildcat
VACUUM UPPER PENN

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.)

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator
Marathon Oil Company

3. Address of Operator
P.O. Box 552 Midland, Tx. 79702

4. Well Location
Unit Letter K : 2030 Feet From The WEST Line and 1980 Feet From The SOUTH Line
Section 31 Township 17S Range 35E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☒
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

MARATHON REQUESTS PERMISSION TO ALTER THE PROPOSED 8-5/8" INTERMEDIATE CSG TO 9-5/8" FLUSH JT. THE REVISED CSG SETTING DEPTH WILL BE 3000'. THE ORIGINAL PROPOSED CSG DEPTH FOR 8-5/8" WAS 3800'. THE 9-5/8" CSG WILL BE PRESSURE TESTED PER STATE REQUIREMENTS.

THIS EXCEPTION IS REQUESTED TO ALLOW FOR 7" PRODUCTION CSG. THIS EXCEPTION WAS DISCUSSED W/ JERRY SEXTON.

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

SIGNATURE W. J. Arnold FOR TBA TITLE DRLG SUPT. DATE 12-07-93

TYPE OR PRINT NAME TIM ARNOLD

TELEPHONE NO. 915-682-1626

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE DEC 10 1993

CONDITIONS OF APPROVAL, IF ANY: