

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.

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
MCCALLISTER STATE

8. Well No.
11

9. Pool name or Wildcat
VACUUM; U Penn/Wolfcamp/Abo

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 1927 Feet From The SOUTH Line and 2134 Feet From The WEST Line
Section 25 Township 17-S Range 34-E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4013'GL

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 DHC as per Order # 1097 ☐

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 Oil Co intends to implement the Downhole Commingling of this well as per the summarized procedure below.
MIRU PU. POOH With rods and pump. NU BOP. POOH W/Tbg. Test BOP. POOH with RBP @ 9268'.
Using sandline drill knock out CIBP @ 9980 to PBTD @ 10224'. POOH with sand line drill.
Install 2 7/8" production tubing. SN @ 10,090 TAC @ 8,350. ND BOP. NU Tree. Install rods and pump. Hang well on and turn to test facility.

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

SIGNATURE

TITLE AET

DATE 5/2/95

TYPE OR PRINT NAME Thomas M. Price

TELEPHONE NO 915/682-1626

This space for State Use

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

MAY 04 1995