

November 1987  
Form 7-331

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

SECRET, DISTRIBUTION 1004-0135

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL

NM-02127-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <u>Salt Water Disposal Well</u>		7. UNIT AGREEMENT NAME <u>Lea Unit</u>
2. NAME OF OPERATOR <u>Marathon Oil Company</u>		8. FARM OR LEASE NAME <u>Lea Unit</u>
3. ADDRESS OF OPERATOR <u>P. O. Box 552, Midland, Texas 79702</u>		9. WELL NO. <u>8</u>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below) <u>Unit Letter B</u> <u>810' FNL &amp; 1980' FEL</u>		10. FIELD AND POOL OR WILDCAT <u>Lea Pool (Capitan Reef)</u>
14. PERMIT NO. <u>-</u>		11. SEC., T., R., M., OR BLK. AND SUBST OR AREA <u>Sec. 12, T20S, R34E</u>
15. ELEVATIONS (Show whether DF, RT, CR, etc.) <u>3674' GL; 3693' KB</u>		12. COUNTY OR PARISH <u>Lea</u>
		13. STATE <u>NM</u>

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Replace 4 1/2" tubing</u>	<input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Marathon Oil Company initiated Operations to replace the 4 1/2" tubing in the above referenced well in May 1988. Following is the procedure:

1. MIRU pulling unit.
2. NU BOP's.
3. RIH w/7" Baker AD-1 pkr. on 4 1/2", 10.55#, K-55 tubing w/Duo-line integral lining & set pkr at 3965'.
4. Press'd. Backside to 500 psig. Held OK.
5. ND BOP's.
6. NU Wellhead
7. RD pulling unit.
8. Placed well on injection.

RECEIVED  
MAR 7 10 53 AM '89

18. I hereby certify that the foregoing is true and correct

SIGNED <u>J. R. Jenkins</u>	TITLE <u>Hobbs Prod. Sup't.</u>	DATE <u>3-3-89</u>
(This space for Federal or State office use)		
APPROVED BY <u>[Signature]</u>	TITLE <u>CLASS</u>	DATE <u>3-3-89</u>
CONDITIONS OF APPROVAL, IF ANY		

CARLSBAD, NEW MEXICO \*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

