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NEW MEXICO OIL CONSERVATION COMMISSION

JAN 30 7 54 AM '67

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No. ---
7. Unit Agreement Name ---
8. Farm or Lease Name Bertha Barber
9. Well No. 2
10. Field and Pool, or Wildcat Monument
12. County Lea

**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. OIL WELL ☒ GAS WELL ☐ OTHER-  
2. Name of Operator  
Marathon Oil Company  
3. Address of Operator  
P. O. Box 220, Hobbs, New Mexico  
4. Location of Well  
UNIT LETTER C 660 FEET FROM THE North LINE AND 1980 FEET FROM  
THE West LINE, SECTION 5 TOWNSHIP 20S RANGE 37E NMPM.  
15. Elevation (Show whether DF, RT, GR, etc.)  
GR 3569'

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER Acidize <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1705.

3894' TD. Acidized Grayburg formation in open hole w/1000 gal. 7 1/2% Dolowash.  
Max. press. 300 psi, Avg. Rate 1 BPM.

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

SIGNED [Signature] TITLE Area Supt. DATE 1-26-67  
PROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

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