NO. OF COPIES RECEIVED	· ·		Form C-103
DISTRIBUTION		•	Supersedes Old
SANTA FE	NEW MEXICO OIL CO	NSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE		:	
U.S.G.S.			5a. Indicate Type of Lease
LAND OFFICE	-		State Fee K
OPERATOR	]	•	5. State Oil & Gas Lease No.
			**************************************
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.)			
I. OIL X GAS WELL	OTHER-		7. Unit Agreement Name
2. Name of Operator			8. Farm or Lease Name
Marathon Oil Company 3. Address of Operator			W. H. Laughlin
P. O. Box 2409, Hobbs, New Mexico 88240			9. Well No.
4. Location of Well	, new managed objects	7.2	10. Field and Pool, or Wildcat
UNIT LETTER H	1980 FEET FROM THE North	· ·	Eunice Monument G-SA
East	ON 9 TOWNSHIP 20	າດ 37¤	
THE LINE, SECTION	ON TOWNSHIP	RANGENMPM	
	15. Elevation (Show wheth	er DF, RT, GR, etc.)	12. County
	DF 3555'; GL	3544 °	Lea
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
Pull OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
	_	OTHER	Well Status X
OTHER		<b>_</b>	
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 1103.			
1. Status: Temporarily Abandoned			
2. Date T.A. Commenced: June 29, 1954			
3. Reason for T.A.: Hydrocarbon reserves in completion interval depleted			
4. Future Plans:	Workover	:	
5. Approximate date of any future workover or P&A: Last Half of 1975			
Expire	0 11/1/75		
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
5my 0		_	
SIGNED ///	Tiveler TITLE_	Petroleum Engineer	DATE November 8, 1974
<del>//</del>			
APPROVED BY	Origin Style Control of the Control		New York

CONDITIONS OF APPROVAL, IF ANY:

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CIL COMO TOMAN TO COMM.