

DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
HOBBS, NEW MEXICO 88240

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.)

5. LEASE DESIGNATION AND SERIAL NO.

NM-01243

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Lea Unit

8. FARM OR LEASE NAME

Lea Unit

9. WELL NO.

13

10. FIELD AND POOL OR WILDCAT

Lea (Shuman)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 24, T20S, R34E

12. COUNTY OR PARISH 13. STATE

Lea N. Mex

1. WELL ☐ GAS ☐ WELL ☒ OTHER

2. NAME OF OPERATOR

Marathon Oil Company

3. ADDRESS OF OPERATOR

P.O. Box 2409, Hobbs New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements \*  
\* See rule space 17 below  
a. Surface

1980 FNL & 1980 FEL

14. VERSION

15. OPERATIONS (Show whether DE, RT, GR, etc.)

GR 3669 KB 3683

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

1. NATURE OF INTENTION TO:

WATER SHUT OFF

PLUG OR SEAL

REPAIR

REPAIR OR REPLACE

REPAIR OR REPLACE

ABANDON\*

REPAIR

DATA

2. SUBSEQUENT REPORT OF:

WATER SHUT OFF

REPAIRING WELL

FRACURE TREATMENT

ALTERING CASING

SHUTTING OR PLUGGING

ABANDONMENT\*

Other Completion Operations

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

\* If well is plugged or sealed, or if well is plugged or sealed, give pertinent details, and give pertinent dates, including estimated date of starting any work on this well. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

This well is now shut-in after swab testing for several days. Further evaluations are being made.

RECEIVED

MAR 13 1986

APPROVED FOR 12 MONTH PERIOD  
ENDING 3/15/87

HOBBS, NEW MEXICO

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

SIGNED *[Signature]*

TITLE *Area Manager*

DATE *March 3, 1986*

(This space for Federal or State office use)

APPROVED BY *[Signature]*

TITLE *AREA MANAGER*

DATE *3-17-86*

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

Title is hereby made 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.

RECEIVED  
MAR 19 1985  
C. P.  
HOBBS