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 Office			
DISTRICT I		ATION DIVISION	WELL API NO.
P.O. Box 1980, Hobbs NM 88240 P.O. Box 2088 Santa Fe, New Mexico 87504-2088		30 625-32532	
P.O. Drawer DD, Artesia, NM 88210	Salita Pe, New	WICKICO 6/304-2066	5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE X FEE 6. 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"			7. Lease Name or Unit Agreement Name
	C-101) FOR SUCH PROPOSAL		BERTHA BARBER
1. Type of Well: OIL GAS WELL WELL WELL	OTHER		
2. Name of Operator			8. Well No.
Marathon Oil Company 3. Address of Operator			15
P.O. Box 552, Midland,	TX 79702		9. Pool name or Wildcat EUMONT - YATES - 7R - QUEEN
4. Well Location	^	IODTU 10	DOD LIECT
Unit Letter LOT 3: 99	Feet From The	ORTH Line and 19	P80 Feet From The WEST Line
Section 5	Township 20S	Range 37E w whether DF, RKB, RT, GR, et	NMPM LEA County
	10. Elevation (Sho	3556'GL; 3562'KB	(c.)
11. Check A	ppropriate Box to Inc		, Report, or Other Data
-	NTENTION TO:	1	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	L ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	G OPNS. L. PLUG AND ABANDONMENT L
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB
OTHER:		OTHER:	
12. Describe Proposed or Completed Ope work) SEE RULE 1103.	erations (Clearly state all perti	nent details, and give pertinent da	tes, including estimated date of starting any proposed
1/14/95: MIRU PU. NU BO tubing @ 3127'. ND BOP	OP. RIH W/2 1/16" P. NU wellhead. Ri	Tbg. C/O sand 3485- MO PU.	3629 with nitrogen. Landed
I hereby certify that the information above is	true and complete to the best of my	knowledge and belief.	
SIGNATURE Thomas me	hice	TITLE Adv. Eng. Te	ch. DATE 1/27/95
TYPE OR PRINT NAME THOMAS M P			TELEPHONE SO 915/682/1626

_ TITLE _

APPROVED BY___

(This space for State Use) GRIGINAL GONGARY SEXTON

DISTRICT I SUPERVISOR

PECEIVED OFFICE