

Submit 3 Copies To Appropriate District Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103

Revised March 25, 1999

WELL API NO.

30-025-33578

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:

McGrail State

8. Well No. 8

9. Pool name or Wildcat  
Monument Abo

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. Type of Well:

Oil Well ☐ Gas Well ☐ Other ☐

2. Name of Operator

Marathon Oil-WTNM

3. Address of Operator

P.O. Box 552, Midland, TX 79702

4. Well Location

Unit Letter A : 990 feet from the North line and 380 feet from the East line

Section 27 Township 19-S Range 36-E NMPM County Lea

10. Elevation (Show whether DR, RKB, RT, GR, etc.)

11.

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Swab test individual perforated intervals.

Stimulate all perforations.

Perforate Abo from 7382-92' at 6 SPF.

Place well on pump.

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

SIGNATURE Julie Poupart TITLE Administrative Assistant

DATE 2/12/02

Type or print name Julie Poupart

(This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

Conditions of approval, if any:

ORIGINAL SIGNED BY  
PAUL F. KAUTZ  
PETROLEUM ENGINEER

Telephone No. (915)687-8418

DATE FEB 18 2002