Submit 3 Copies To Appropriate District Office District I	Energy, Minerals and Natural Resources 1 88240 OIL CONSERVATION DIVISION 1 220 South St. Francis Dr.			Form C-103 Revised March 25, 1999 WELL API NO. 30-025-06124				
1625 N. French Dr., Hobbs, NM 88240 District II								
1301 W. Grand Ave., Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410			icis Dr.	5. Indicate Type of Lease STATE S FEE				
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505				6. State Oil & Gas Lease No. A-3071				
SUNDRY NOTIC (DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR. USE "APPLICA	7. Lease Name or Unit Agreement Name:							
PROPOSALS.) 1. Type of Well:	Hanson State							
Oil Well Gas Well Or 2. Name of Operator Marathon	8. Well No. #1							
	2490							
3. Address of Operator P.O. Box	9. Pool name or Wildcat Monument							
4. Well Location				I <u></u>				
Unit Letter <u>B</u> :	660 feet from the	No	rthline and	2,310 feet	from the <u>East</u>	_line		
Section 16	1	20 <b>-S</b>	Range 37-E		County Le	a		
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,553' GL; 3,565' KB								
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data								
			SUB: REMEDIAL WORK	SEQUENT R	EPORT OF: ALTERING CASIN			
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TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRI		PLUG AND ABANDONMENT	$\boxtimes$		
	MULTIPLE COMPLETION		CASING TEST AN CEMENT JOB	1D 🗌				
OTHER:			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.

**05/10/02** Notified OCD, Sylvia. MIRU Triple N rig #24 and POOH w/ rods/pump. NU BOP and POOH w/ tubing. SD for weekend.

**05/13/02** Notified OCD, Sylvia Dickie. Set CIBP @ 3,603'. Circulated hole w/ mud and pumped 25 sx C cmt 3,603 – 3,233'. Pumped 25 sx C cmt 2,515 – 2,144'. Pumped 25 sx C cmt w/ 3% CaCl<sub>2</sub> @ 1,242'. WOC and tagged cmt @ 915'. Pumped 35 sx C cmt 465' to surface.

05/22/02 Cut off wellhead and installed dry hole marker, cut off anchors, backfilled cellar and pit.

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I hereby certify that the	e information above is true and comp	lete to the be	est of my knowledge	and belief.		
SIGNATURE	A H	TITLE	Engineer		DATE_	05/22/02
Type or print name	James F. Newmar, P.E.	Triple N	Services, Inc.		Telephone No.	915-687-1994
(This space for State u APPPROVED BY	Samell, Liff	TITLE or			JUN O DATE	7 2002
Conditions of approva	L if any:		IMPLIANCE OFFIC	;ER		