Submit 3 Copies

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

to Appropriate
District Office

APPROVED BY_

CONDITIONS OF APPROVAL, IF ANY:

___SEP 15 1994

DISTRICT I	OIL CONSERVATION DIVISION				
P.O. Box 1980, Hobbs NM 88240 DISTRICT II	P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO. 30-025-06819		
P.O. Drawer DD, Artesia, NM 88210	Santa 1 c, 14ew Mexico 8/304-2088		5. Indicate Type of Lease		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410)			6. State Oil & Gas Lease No.	FEE X
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.)			7. Lease Name or Unit Agreement Name		
1. Type of Well: OIL GAS WELL WELL				W. S. MARSHALL "B"	
2. Name of Operator Marathon Oil Company				8. Well No.	
3. Address of Operator P.O. Box 552, Midland, TX	70700			9. Pool name or Wildcat	
4. Well Location				TUBB/DRINKARD	
Unit Letter M : 660	Feet From The SOUTH		Line and 600	Feet From The WEST	Line
Section 27	Township 21-S	Ra:	nge 37-E	NMPM LEA	Country
	10. Elevation (Show GL:3431	whethe	r DF, RKB, RT, GR, etc.		County
11. Check A	propriate Box to Indi	cate l	Nature of Notice,	Report, or Other Data	
NOTICE OF I	NTENTION TO:			SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK	ALTERING CASING	Г
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING		ENT [
PULL OR ALTER CASING			CASING TEST AND CEN	_	
OTHER:	[OTHER: DHC # 771		Г
12. Describe Proposed or Completed Operwork) SEE RULE 1103.	rations (Clearly state all pertine	nt detai	ils, and give pertinent date	s, including estimated date of starting any p	roposed
Marathon Oil Co recently con Order. The work is summari 8-4-94: MIRU PU. NU BOP. I on-off tool and Pkr. C/O to Installed rods and 1 1/16" pt	Release Pkr and tag @ 6, 6439'. Installed 2 #/8" ump. Hung well off and	402'.	POOH with Tbg, Si		
I hereby certify that the information above is true. SIGNATURE TRUE TRUE TRUE TRUE TRUE TRUE TRUE	ee and complete to the best of my know		nd belief. Adv. Eng. Tech.	DATE 9-8-94	
TYPE OR PRINT NAME Thomas M. Pric	e			TELEPHONE NO. 915-687	-83
(This space for State Use)	21/1/24				

TITLE .