Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office		<u>-</u>	KCVBCu 1-1-09
DISTRICT I	OIL CONSERVA	TION DIVISION	TWDV ADVANCE
P.O. Box 1980, Hobbs NM 88240 P.O. Box 2088 DISTRICT II Santa Fe New Mexico 87504, 2088			WELL API NO. 30 - 025 - 08916
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088			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" (FORM C-101) FOR SUCH PROPOSALS.)			
			7. Lease Name or Unit Agreement Name MCDONALD "WN" ST
1. Type of Well: OIL GAS GR			THOSONALS WIN ST
WELL WELL X	OTHER		
2. Name of Operator Marathon Oil Company			8. Well No.
3. Address of Operator P.O. Box 552, Midland,	TX 79702		9. Pool name or Wildcat
4. Well Location	20 00	ITII 10	JALMAT/TANSILL,Y,SR
Unit Letter K : 198	SU Feet From The SU	JTH Line and 19	P80 Feet From The WEST Line
Section 15	Township 22S	Range 36E	NMPM LEA County
		whether DF, RKB, RT, GR, et GL 3554', KB 3567'	c.)
11. Check A			, Report, or Other Data
			BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
PULL OR ALTER CASING	OT A WIGHT EARLY	CASING TEST AND CE	
			ER RECOMPLETIOIN X
OTHER:	erations (Clearly state all nertine)		tes, including estimated date of starting any proposed
work) SEE RULE 1103.	oranons (crearry state an pertiner	C	tes, including estimated date of starting any proposed
12/6/94 MIRU FOAM AIR UNIT. POOH WITH PROD TBG. C/O WITH FOAM AIR TO PBTD 3760'. HARD SAND			
3562-3601. RIH WITH 2	7/8" PROD TBG TO 34	83'. ND/BOP NU WE	LLHEAD. PUT WELL TO SALES LINE
		V	
I hereby certify that the information above is	s true and complete to the best of my kn	owledge and belief.	
SIGNATURE THOMAS	nt nie	TITLE Advanced Eng	. Tech. DATE 1/12/95
TYPE OR PRINT NAME THOMAS M. F	rice		TELEPHONE NO.915/682-1626
(This space for State Use)	PORT OF BEACH		FER 67 1995
APPROVED BY	A CLI & SUTTERMISOR	TITLE	DATE

APPROVED BY__

CONDITIONS OF APPROVAL, IF ANY: