Submit 3 Copies To Appropriate District	State of Ne	w Me	exico					For	rm C-1	.03	
Office District I	Energy, Minerals and	Natu	ral Resou	irces			Rev	ised Mare	ch 25, 19	)99	
1625 N. French Dr., Hobbs, NM 87240					WELL A					٦	
District II 811 South First, Artesia, NM 87210	OIL CONSERVA			SION	E Indian	<u>30-025-</u>				_	
District III	2040 Sout					te Type of					
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, 1	NM 8	7505			ATE 🗌		EE X			
2040 South Pacheco, Santa Fe, NM 87505					6. State (	Dil & Gas	Lease N	0.			
(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR. USE "APPLI		EPEN (	or plug e		7. Lease	Name or U	Jnit Agr	eement ]	Name:		
PROPOSALS.) 1. Type of Well:					South Eunice (7RQ) Unit						
Oil Well Gas Well	Other Water Inj	ectio	n								
2. Name of Operator						8. Well No.					
Marathon Oil Company					102						
3. Address of Operator					9. Pool name or Wildcat						
PO Box 2490 Hobbs, NM	88240				Eunice.	<u>South (</u>	<u>Seven F</u>	<u>Rivers</u>	Queen)		
4. Well Location											
Unit Letter <u>M</u> :	660 feet from the	Sou	th	line and	660	_ feet from	the	West	lin	ıe	
Section 23	Township 22	2	Range	36	NMPM		Count	y	Lea		
	10. Elevation (Show wh GL 3	<i>ether 1</i> 3496 '	<i>DR, RKB,</i> KB 35		etc)						
11. Check A	Appropriate Box to Ind	licate	Nature	of Notice	, Report,	or Other	Data			_	
NOTICE OF INT	•• •				SEQUE			OF:			
	PLUG AND ABANDON		REMED	AL WORK				RING CA	ASING		
TEMPORARILY ABANDON	CHANGE PLANS		COMME	NCE DRILI	ING OPNS.				NT		
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING CEMEN	TEST AND F JOB	)						
OTHER:			OTHER:	Return t	o Injectio	on Status	;			X	

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.

6/13 A MIT was performed on this well and witnessed by Buddy Hill (OCD Inspector). Marathon will start injecting water as soon as all surface lines and meters have been checked and are in working condition. We should start injecting water around June 21, 2001.

I hereby certify that the information above is true and complete the SIGNATURE Acception of the second seco	to the best of my knowledge and belief. TITLE Admin. Assistant	DATE	6/15/01
Type or print name Kelly Cook	<u></u>	Telephone No.	393-7106
(This space for State use)			
APPROVED BY	TITLE Contraction	DATE	2 2 2001
Conditions of approval, if any:	to the same star		man