## ATTACHMENT 2 State of New Mexico

Submit 3 Copies to Appropriate District Office	Energy, Minerals and Natural Resources Department OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240			WELL API NO. 30-025-25481
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lesse STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lesse 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
1. Type of Well: Off. GAS WELL X WELL	OTHER		Mark Owen
2. Name of Operator			8. Well No.
Marathon Oil Company 3. Address of Operator	mpany		9. Pool name or Wildcat
P. O. Box 552, Midla	and, Texas 79702		Wantz Granite Wash & Wantz Abo
Unit Letter M : 76	0 Feet From The South	Line and	760 Feet From The West Line
Section 35	Township 21S R	age 37E	NMPM Lea County
	10. Elevation (Show whather	•	
	Appropriate Box to Indicate	Nature of Notice, F	•
NOTICE OF IN	ITENTION TO:	SU	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	G OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB
OTHER: Downhole comm	ningle	OTHER:	
12. Describe Proposed or Completed Ope work) SEE RULE 1103.	entions (Clearly state all pertinent details, as	nd give pertinent dates, incl	uting estimated date of starting any proposed
Request authorization	n to downhole commingle	the Wantz Grani	ite Wash and the Wantz Abo pools.
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I hereby certify that the information above is t	rue and complete to the best of my knowledge and	i belief.	
SIGNATURE tup	Office FOR WOH TH	Operations :	Superintendent DATE 6-19-90
TYPEOR PRINT NAME William	D. Holmes	·	(915) TELEPHONE NO. 682-1626
(This space for State Line)	rig,		
	Paul Kautz - Geologist		
APPROVED BY	<u>.</u> = -	T.E	DATE

DHC-765

CONDITIONS OF AFFROVAL, IF ANY: