Submit 3 Copies To Appropriate District Office <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	s T	Form C-103 Revised March 25, 1999 WELL API NO.						
District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505					30-025-26959 5. Indicate Type of Lease STATE ☑ FEE ☐ 6. State Oil & Gas Lease No.			
SUNDRY NOTION (DO NOT USE THIS FORM FOR PROPOSITION DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.) 1. Type of Well: Oil Well Gas Well (7. Lease Name or Unit Agreement Name: McDonald State A/C 2						
2. Name of Operator Marathon	8	8. Well No. #34						
3. Address of Operator	0400 11-11- 114 00			ì	9. Pool name or Wildcat			
4. Well Location	2490, Hobbs, NM 88	240			South Eunice	e (7 Rivers/Qu	ieen) Unit	-
Unit Letter <u>C</u> : 6	660 feet from the	North	line and _	2,3	10 feet	from the We	est line	
Section 13	Township	13-S		36-E	NMPM	1 County	Lea	
	10. Elevation (Show w. 3,483' GL;			R, etc.)				to being
11. Check A	ppropriate Box to Inc	licate N						壓
NOTICE OF INT PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON		SU REMEDIAL W		QUENT RE	EPORT OF: ALTERING C	ASING □	
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE	DRILLI	NG OPNS.	PLUG AND ABANDONMI	⊠	
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST			ADAIVDONIVI	_141	
OTHER:			OTHER:					
12. Describe proposed or completed starting any proposed work). SEI recompilation.	E RULE 1103. For Multi	iple Comj	pletions: Attach	h wellb	ore diagram of	proposed comp	ated date of letion or	
06/28/02 Notified OCD, Sylvia Dic07/01/02 Notified OCD, Gary Winl							@ C 405	
Circulated hole w/ mud and POOH 3,252'. SDFN.	l w/ tbg to 5,500'. Pum	ped 25 s	ex C cmt 5,500	uns. 15 0 – 5,2	52'. Pumped	25 sx C cmt 3	დ 6,485 . ,500 –	
07/02/02 OCD Buddy Hill on locat 1,375'. WOC and tagged cmt @ 1	ion. Tagged cmt @ 3,3 ,151'. Pumped 35 sx 3	310'. Pu 312' to si	mped 25 sx C urface. RDMC	cmt 2 D.	,687 – 2,440°.	Pumped 25 s	x C cmt @	}
07/11/02 Cut off wellhead and cap	pped well, installed mar	ker. Cut	off anchors a	and lev	eled pit.			
I hereby certify that the information at	pove is true and complete	to the be	st of my knowle	edge an	d belief.			
SIGNATURE	т	ITLE	Engineer			_date_ <u>08/</u>	02/02	_
	Newman, P.E. T	riple N S	ervices, Inc.		Tele	ephone No. 915	5-687-1994	Į.
This space for State use) APPPROVED BY	1). A.D TI	C(OMPLIANCE (OFFICE	R	CCI _{TE} O 5 20	102	Q

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Submit 3 Copies To Appropriate District	State of	New M	exico		Form C	102	
Office District I	Energy, Minerals and Natural Resources			Form C-103 Revised March 25, 1999			
1625 N. French Dr., Hobbs, NM 88240				WELL API NO.	. Revised Maich 25	, 1999	
District II 811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION				30-025-26959			
District III	1220 South St. Francis Dr.			5. Indicate Type of Lease			
1000 Rio Brazos Rd., Aztec, NM 87410 District IV				STATE X FEE			
1220 S. St. Francis Dr., Santa Fe, NM				6. State Oil &	Gas Lease No.		
87505	CEG AND DEPONTS O						
(DO NOT USE THIS FORM FOR PROPOS	CES AND REPORTS O	N WELL:	S LIG BACK TO A	7. Lease Name	or Unit Agreement Na	ame:	
DIFFERENT RESERVOIR. USE "APPLIC	MaDamald Cont	A (C) 0					
PROPOSALS.) 1. Type of Well:				McDonald State	A/C 2		
Oil Well X Gas Well [☐ Other						
2. Name of Operator				8. Well No.			
Marathon Oil Company				34			
3. Address of Operator				9. Pool name or Wildcat			
	NM 88240 505-393	3-7106		Eunice; Seven Rivers Queen, South			
4. Well Location							
Unit Letter_ C :	660 feet from the	X7 .1					
Om Dent Letter	feet from the	North	line and2	feet fro	om the <u>West</u>	line	
Section 13	Township		Range 36-E	NMPM	County Lea		
	10. Elevation (Show w	hether D	R, RKB, RT, GR, etc.	.)	County Lea		
	GL	3483'	KB 3495'	•			
11. Check A	ppropriate Box to Inc	dicate N	ature of Notice, I	Report or Other	Data		
NOTICE OF IN	TENTION TO:		SUBS	SEQUENT RE	PORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK		ALTERING CASIN	G □	
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRIL	LING OPNS	DI LIO AND		
			OOMINICINGE DAIL	LING OPNS.	PLUG AND ABANDONMENT		
PULL OR ALTER CASING	MULTIPLE		CASING TEST AN	D 🗆	THE STATE OF THE CAT		
	COMPLETION		CEMENT JOB				
OTHER:			OTHER: RC in Eu	umont		х	
12. Describe proposed or complete	d operations. (Clearly sta	ate all per	tinent details, and oi	ve pertinent dates	including estimated		
of starting any proposed work).	SEE RULE 1103. For M	Multiple C	Completions: Attach	wellbore diagram	of proposed completi	ion	
or recompilation.				· ·	r - r	OII	
Marathon's attempt to recomplete	a thin wall to the Tarre	C · ·	.•				
Marathon's attempt to recomplete before work commences to retrie	s uns wen to the Eumo	nt Iorma	tion was unsuccess	stul. A sundry n	otice will be filed		
octore work commences to retire	ve equipment left in the	e noie, ai	nd plug and abando	onment of the we	Ж.		
6/8 RU pulling unit. POOH w/p	nump & rods ND well	head NI	ROP POOR wh	20			
6/12 RIH, set CIBP at 6520. Dur	np 35' cmt on top. Loa	id & test	OK	og.	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
6/13 Perf w/TCP guns at 3524-32	2, 3540-56, 3565-69, 3	574-90.	3620-26, 3640-56	3668-72 w/pkr s	ent at 2/10		
Swab. No recovery. RIH w/	WL, run BHP bomb. U	Jnable to	get thru the may	3000-12 W/PKI 3	et at 5412.		
have collapsed. POOH w/W	L. Shut well in.		8	*	\$ 5		
6/15 RD pulling unit.				•			
					* *		
I hereby certify that the information a	above is true and complete	te to the b	est of my knowledge	and belief.			
SIGNATURE Kelle Coro	, b	TITLE_	A director A contract				
Significant production of the signif	4	IIILE	Admin. Assistant	<u> </u>	_DATE <u>6/25/02</u>		
Type or print name Kelly Cook				Tel	lephone No. 393-710	6	
(This space for State use)	(estra a	 	10	-spiiono 140. 393-1100		
A PROPOSITION	Ċ	ARY W	LD BY		11 tr		
APPPROVED BY	a	(FTILELD	THINK REPRECENTAL		_DATE_JUL 2	<u> 2002</u>	
Conditions of approval, if any:		_	WINK REPRESENTATIVE I	I/STAFF MANAC	ED		
				- 11 1/1(0)	~ L		

5 6 5

ZA Drkd,