Submit 3 Copies to Appropriate

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office			
DISTRICT I OIL CONSERVAT	TON DIVISION		
P.O. Box 1980, Hobbs NM 88240 P.O. Box 2088		WELL API NO. 30 - 025 - 33397	
DISTRICT II 811 S. 1st Street, Artesia, NM 88210-2834 Santa Fe, New Mexico 87504-2088		5. Indicate Type of Lease	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		STATE X F	FEE 🗌
		or state on the day Louise (40.	
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:		McDonald State A/C 2	
OIL GAS WELL X OTHER			
2. Name of Operator		8. Well No.	
Marathon Oil Company		35	
3. Address of Operator P.O. Box 2409, Hobbs, NM 88240		9. Pool name or Wildcat Eumont: Yates, 7 Rivers Queen	Unit
4. Well Location Unit Letter E: 1980 Feet From The Nort	h 6		Ollic
reet From The	h Line and 6	Feet From The West	Line
Section 13 Township 22-S	Range 36-E	NMPM Lea	County
10. Elevation (Show wh	nether DF, RKB, RT, GR, et	2.)	
Check Appropriate Box to Indica	te Nature of Notice.	Report, or Other Data	
		SSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON	DEMEDIAL WORK	1 AL TERNIC 2 A 2002	
	REMEDIAL WORK	☐ ALTERING CASING	
	J COMMENCE DRILLING		ENT L
PULL OR ALTER CASING L	CASING TEST AND CE	MENT JOB []	
OTHER:	OTHER: CLEAN OUT		X
 Describe Proposed or Completed Operations (Clearly state all pertinent of work) SEE RULE 1103. MIRU PU POOH WITH PRODUCTION TUBING. PICK UP BULLDOG ETAIL STATE OF AND STAFE AND STAFE AND WITH PRODUCTION TUBING. NO BOP AND NU WELL AS IN WITH PUMP AND RODS, HANG WELL OFF AND STAFE AND STA	BAILER AND BAIL SAND LHEAD.		roposed
I hereby certify that the information above is true and complete to the best of my knowledge to the best of my knowledge.	edge and helief.		
SIGNATURES SCOTT Charles	TITLE FIELD TECH	DATE FEB. 6, 1	1997
TYPE OR PRINT NAME SCOTT HODGES		TELEPHONE NO.	
(This space for State Use)		173.1	<u> </u>
APPROVED BY	TIF	LATE	

