State of New Mexico Submit 3 Conies Form C-103 Energy, Minerals and Natural Resources Department to Appropriate District Office Revised 1-1-89 DISTRICT I OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-025-06599 Santa Fe. New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM \$2210 5. Indicate Type of Lease FER X STATE DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. 874160 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) L. G. WARLICK C Type of Well: WELL WELL X OTHER 2. Name of Operator & Well No. Marathon Oil Company 8 3. Address of Operator 9. Pool name or Wildox P.O. Box 552 Midland, Tx. 79702 WANTZ (ABO) 4. Well Location _ : __1650 Feet From The _ SOUTH 990 Feet From The _ **EAST** Line and Line Township nship 21-S Range 37-E 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 21-S 37-E **NMPM** Section 15 LEA Count GL: 3413' KB: 3427' Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMEN **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB OTHER: OTHER: 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dotes, including estimated date of starting any proposed work) SEE RULE 1103.

ADD PERFORATIONS AND SAND FRACTURE THE WANTZ ABO

- MIRU PU. NO WELLHEAD. INSTALL & TEST BOPS. POOH W/PRODUCTION 1. **EQUIPMENT**
- PERFORATE WANTZ ABO @ 6732', 60', 6808', 7196', 7239', & 7246' W/1 SPF, 6 HOLES. ACIDIZE W/3000 GALS. SAND FRAC W/83450 GALS 305000# 20/40 SD. SWAB BACK LOAD. RIH W/PRODUCTION EQUIPMENT.
- ND BOPS & INSTALL WELLHEAD.
- RD PU. MOL.

I hereby certify that the information aboys is true and complete to the best, of my knowledge and belief.			
I hereby certify that the information above is true and complete to the best of my known		TITLE ADVANCED ENG. TECH.	DATE 9/14/92
TYPE OR PRINT NAME	BRENT D. LOCKHART		TELEPHONE NO.682-1626
(This space for State Light GINAL SUSNED BY JERRY SEXTON BUSTRICT I SUBBRUTSOR			SEP 24 9

TITLE .

DATE .

CONDITIONS OF APPROVAL, IP ANT:

APTROVED BY-