

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

WELL API NO. 30-025-09048	
5. Indicate Type of Lease STATE FEE X	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name: Eunice, South (Seven Rivers Queen) Unit	
8. Well No. 202	
9. Pool name or Wildcat Eunice; Seven Rivers Queen, South	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) KB 3498' GL 3506'	

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.)

1. Type of Well:
Oil Well Gas Well ☐ Other X Water Injection

2. Name of Operator
Marathon Oil Company

3. Address of Operator
PO Box 2490 Hobbs, NM 88240 505-393-7106

4. Well Location
Unit Letter E : 1980 feet from the North line and 660 feet from the West line
Section 26 Township 22 Range 36 NMPM County Lea

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: MIT test 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.

8/15 A MIT test was performed on the above reference well and witnessed by E.L. Gonzalez, OCD Representative.
The well was pressure tested to 390 psi for 20 minutes with no pressure drop.
Please find the chart attached.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Kelly Cook TITLE Admin. Assistant DATE 8/28/02

Type or print name Kelly Cook Telephone No. 393-7106

(This space for State use)

APPROVED BY GARY W. WINK DATE SEP 03 2002
Conditions of approval, if any:

