

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.

30-025-09176

5. Indicate Type of Lease

STATE ☒ FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:

Eunice, South (Seven Rivers Queen) Unit

8. Well No.

413

9. Pool name or Wildcat

Eunice; Seven Rivers Queen, South

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 ☒ 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 K: 1650 feet from the South line and 1650 feet from the West line

Section 36 Township 22 Range 36 NMPM County Lea

10. Elevation (Show whether DR, RKB, RT, GR, etc.)

GL 3440' KB 3451'

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 ☒

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.

11/8 MIT test was performed on the above reference well and witnessed by E.L. Gonzalez, OCD Representative.
The well was pressure tested to 500 psi for 30 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 11/27/02

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

(This space for State use)

ORIGINAL SIGNED BY

CHRIS WILLIAMS

APPROVED BY OC DISTRICT SUPERVISOR/GENERAL MANAGER TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER

DATE DEC 05 2002

Conditions of approval, if any:

ORIGINAL SIGNED BY

CHRIS WILLIAMS

OC DISTRICT SUPERVISOR/GENERAL MANAGER