Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs NM 88240

DISTRICT II
811 S. 1st Street, Artesia, NM 88210-2834

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-025-09950

5. Indicate Type of Lease
STATE ☐   FEE ☒

6. State Oil & Gas Lease No.

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
WALTER LYNCH

1. Type of Well:
OIL WELL ☒   GAS WELL ☐   OTHER

2. Name of Operator
Marathon Oil Company

8. Well No.
5

3. Address of Operator
P.O. Box 2409, Hobbs, NM   88240

9. Pool name or Wildcat
BLINEBRY OIL & GAS

4. Well Location
Unit Letter   C : 660 Feet From The   NORTH   Line and   1980   Feet From The   WEST   Line

Section   1   Township   22-S   Range   37-E   NMPM   LEA   County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
KB   3362'   GR 3350'

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 ☐

OTHER: _____ ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐   ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐   PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: SHUT-IN DRINKARD, RC TO BLINEBRY ☒

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.

MARATHON OIL COMPANY SHUT-IN DRINKARD FORMATION AND RECOMPLETED TO THE BLINEBRY OIL
& GAS FORMATION.

PLEASE SEE ATTACHED FOR SUMMANRY OF WORK.

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

SIGNATURE _____   TITLE ENGINEER TECHNICIAN   DATE 5/28/96

TYPE OR PRINT NAME SCOTT HODGES   TELEPHONE NO. 393-7106

(This space for State Use)

APPROVED BY _____ Signed by Paul Kautz Geologist   TITLE _____   DATE MAY 3 0 1996

CONDITIONS OF APPROVAL, IF ANY:

S Brunson
2A Drinkard Ab