

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  
P.O. Drawer DD, Artesia, NM 88210

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.  |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.<br>B-01167   |

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:  
OIL WELL ☐ GAS WELL ☒ OTHER

|                 |
|-----------------|
| Shell "B" State |
|-----------------|

2. Name of Operator  
Maralo, Inc.

|               |
|---------------|
| 8. Well No. 1 |
|---------------|

3. Address of Operator  
P.O. Box 832, Midland, Texas 79702

|   |
|---|
| 9. Pool name or Wildcat<br>Jalmat (Gas) |
|---|

4. Well Location  
Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West Line

Section 16 Township 23-S Range 36-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3448

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

|  |  |   |   |
|--|--|---|---|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input checked="" type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>              | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>                | COMMENCE DRILLING OPNS. <input type="checkbox"/>    | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  |  | CASING TEST AND CEMENT JOB <input type="checkbox"/> |   |
| OTHER: <input type="checkbox"/>                |  | OTHER: <input type="checkbox"/>                     |   |

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.

1. Notify NMOCC prior to beginning plugging procedure.
2. RUPU.
3. TIH w/guage ring & junk basket on slick line to insure csg clear to perforations.
4. TIH w/5 1/2" CIBP and set @  $\pm$  3450'. Cap w/35' cement.
5. TIH w/tbg open-ended to PBTD. Circulate hole w/10#/gal mud-laden fluid.
6. Perf 4 squeeze holes in 5 1/2" csg @1650'. Pump 40 sx down tbg. displacing 25 sx out perfs and leaving 15 sx inside csg.
7. Perf 4 squeeze holes in 5 1/2" csg @ $\pm$  350'. Pump 40 sx down tbg displacing 25 sx out perfs and leaving 15 sx inside csg.
8. Spot 10 sx plug @ surface.
9. Remove wellhead, cut off csg and weld plate on csg.
10. Clean up location.
11. Place metal dry hole marker at location.

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

SIGNATURE Brenda Coffman TITLE Agent DATE 2-20-91

TYPE OR PRINT NAME Brenda Coffman TELEPHONE NO. 15 684-7441

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: