

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.
30-025-216550000

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
McDONALD STATE A/C 3 "B"

8. Well No.

1

9. Pool name or Wildcat
STATELINE (ELLENBURGER)

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

2. Name of Operator
Marathon Oil Company

3. Address of Operator
P.O. Box 552 Midland, Tx. 79702

4. Well Location
Unit Letter K : 1875 Feet From The SOUTH Line and 1875 Feet From The WEST Line

Section 32

Township 23-S

Range 38-E

NMPM

LEA

County

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

GL: 3290' KB: 3302'

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 CPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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. MIRU KILL TRUCK.

2. TEST CASING FROM SURFACE TO 12034' TO 500 PSI. HOLD PRESSURE
& RECORD FOR 30 MINUTES. RELEASE PRESSURE.

3. RD KILLTRUCK. MOL.

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

SIGNATURE

Brent D. Lockhart

TITLE ADVANCED ENG. TECH.

DATE 7/30/92

TYPE OR PRINT NAME

BRENT D. LOCKHART

TELEPHONE NO. 682-1626

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

MANAGER, SUPERVISOR

TITLE

DATE

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

AUG 06 1992

PREPARED BY B. D. LOCKHART