

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

2040 South Pacheco
Santa Fe, NM 87505Form C-103
Revised March 25, 1999

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.)		WELL API NO. 30-025-09746
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator MARALO, LLC		6. State Oil & Gas Lease No.
3. Address of Operator P. O. BOX 832, MIDLAND, TX 79702		7. Lease Name or Unit Agreement Name: JAL MAT YATES UNIT
4. Well Location Unit Letter <u>I</u> : <u>2310</u> feet from the <u>NORTH</u> line and <u>330</u> feet from the <u>EAST</u> line Section <u>12</u> Township <u>25S</u> Range <u>36E</u> NMPM LEA County		8. Well No. 1
10. Elevation (Show whether DR, RKB, RT, GR, etc.) N/A		9. Pool name or Wildcat JALMAT; TAN-YATES-7 RVRS

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: ☐

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 recompletion.

01/12/01 -- SET CIBP @ 2790' - SPOT 25 SXS ON TOP - 2690'

01/15/01 -- PERFORATE @ 1059' - SQUEEZE 55 SXS - TAG @ 837'

01/16/01 -- PERFORATE @ 650' - SQUEEZE 65 SXS - TAG @ 510'

01/16/01 -- SPOT 20 SXS @ 30' TO SURFACE, CIRCULATE 10# MUD, INSTALL DRY HOLE MARKER.

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

SIGNATURE Dorothea Logan TITLE REGULATORY ANALYST DATE JANUARY 23, 2001Type or print name DOROTHEA LOGANTelephone No. (915) 684-7441

(This space for State use)

APPROVED BY Ferry W. Sipe TITLE CHIEF OF DIVISION DATE FEB 06 2001

Conditions of approval, if any: