Submit 3 Copies To Appropriate Distric Office District I	State	of New M		~	Form C-103
1625 N. French Dr., Hobbs, NM 87240 District II	French Dr., Hobbs, NM 87240			Revised March 25, 1999 WELL API NO. 30-025-09746	
811 South First, Artesia, NM 87210 District III				5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410	zos Rd., Aztec, NM 87410 2040 South Pacheco			STATE FEE	
District FV Santa Fe, NM 87505			7505	6. State Oil & Gas Lease No.	
	TICES AND REPORTS	ON WELL			
DIFFERENT RESERVOIR. USE "APP PROPOSALS.)	POSAIS TO DRIFT OD TO DA	CODENI OD DE		7. Lease Name or Unit	Agreement Name:
1. Type of Well: Oil Well I Gas Well Other				JAL MAT YATES UNI	т
2. Name of Operator MARALO, LLC			8. Well No.		
3. Address of Operator P. 0. BOX 832, MIDLAND, TX 79702				9. Pool name or Wildcat	
4. Well Location	1103 1X 73702			JALMAT; TAN-YATES	-7 RVRS
Unit Letter I	: 2310 feet from the	e NORTH	line and	330feet from the	EAST line
Section 12	Township	25S _{Ra}	nge 36E	NMPM LEA Coun	4 -
	10. Elevation (Show	whether D	R, RKB, RT, GR, etc	.)	
11. Check	Appropriate Box to L	ndianta NI			
	Appropriate Box to L NTENTION TO:		ture of Notice, I	Report or Other Data	
PERFORM REMEDIAL WORK	PLUG AND ABANDO	N XX	SUB REMEDIAL WOR	SEQUENT REPORT	「OF: RING CASING 囗
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRI		
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AN CEMENT JOB		
OTHER:			OTHER:		_
12. Describe proposed or compl	eted operations. (Clearly	state all per	inont dataile and	ive pertinent dates includi	
CASING: 10-3/4" 32.75# C	BTD 3043' ORIG. TD SG SET @ 600' CMT'D W/2 [@ 2853' CMT'D W/350 S2	9 3158 300 SX CMT	GL (ELEVATION) CIRCULATED 160'	YOURS PRIOR TO THE	T BE NOTIFIED 2
Estimated Start Date of Pro 1. Prior to moving in well a	posed Plug and Abandon: A service unit, notify New Mex	ugust 1, 2000 cico Oil Cons	, }	V III APPROVED	
	OH w/2-3/8" tubing. RIH w/			フィッ	
	'50', circulate hole w/salt gel				
	nd LD 7" casing. EST TOC 1			or ger per barrer.	
	ent plug across casing cut, 5			ning style () (initiation 40 m)	
	ement plug across base, 10-3			sing stud (minimum 40 sx).	
	2 · · ·				
hereby certify that the informatio	cement plug @ surface, cut on above is true and compl	off wellhead,	install dry hole mark	er, clean location.	
IGNATURE Chasthe			REGULATORY ANALY	~~	<u>JUNE 16, 2000</u>
ype or print name DOROTHEA LO This space for State use)	DGAN			Telephone No	(915) 684-7441
- ,				£.	
PPPROVED BY onditions of approval, if any:	C			DATE	
onanions of approval, it any:				~~~~	
,		(HELL)	Str. V		

-

.

Received Hobbs