

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
2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30-025-09748

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

MARALO JALMAT YATES UNIT

8. Well No.
2

9. Pool name or Wildcat
JALMAT TANSILL YATES SEVEN RIVERS

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

2. Name of Operator
MARALO, INC.

3. Address of Operator
P. O. BOX 832, MIDLAND, TX 79702

4. Well Location
Unit Letter J : 2310 Feet From The SOUTH Line and 1650 Feet From The EAST Line
Section 12 Township 25-S Range 36-E NMPM LEA County

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

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: COMPLETE CONVERSION TO MIW. ☒

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.

PER ADMINISTRATIVE ORDER NO. WFX-702 DATED DECEMBER 10, 1996, MARALO, INC. EXPANDED ITS WATERFLOOD PROJECT UNDER PROVISIONS OF DIVISION ORDER NO. R-5816.

WELL OPENED UP ON VACUUM. POH & LD 2-7/8" WORKSTRING + DC, ND BOP. RIH W/10 JTS. 2-3/8" TBG. NU WELLHEAD. CONVERSION COMPLETED.

WATER INJECTION BEGAN ON JANUARY 24, 1997.

WFX-702

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 31, 1997

TYPE OR PRINT NAME DOROTHEA LOGAN

TELEPHONE NO. 915 684-7441

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

FEB 04 1997

JP