

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

NEW MEXICO OIL CONSERVATION COMMISSION

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E1251	

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. OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/> OTHER- WELL	7. Unit Agreement Name State XX Com.
2. Name of Operator Mobil Oil Corporation	8. Farm or Lease Name
3. Address of Operator Three Greenway Plaza East, Suite 800, Houston, Texas 77046	9. Well No. 1
4. Location of Well UNIT LETTER <u>I</u> <u>660</u> FEET FROM THE <u>East</u> LINE AND <u>1980</u> FEET FROM THE <u>South</u> LINE, SECTION <u>7</u> TOWNSHIP <u>17-S</u> RANGE <u>34-E</u> NMPM.	10. Field and Pool, or Wildcat North Vacuum Morrow
15. Elevation (Show whether DF, RT, GR, etc.) 4105 GR	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	
OTHER <input type="checkbox"/>	

17. 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.

1/18/77

(1) 350 WOC 12-3/4 csg, red beds, Spud. 17½ hole, ½ @ 350, Marcum Rig #5 spud 17½ hole
1 PM 1/7/77, ran 12 jts 12-3/4 40# csg, Howco cmt on bottom @ 350 w/500x H + 2% CaCl2,
PD 4:10 AM 1/8/77, cmt circ.

1/10/77

WOC & NU 39 hrs, test BOP's & csg 600/30 min.

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

SIGNED [Signature] TITLE Authorized Agent DATE 1-11-77

APPROVED BY [Signature] TITLE Supervisor DATE 1-11-77

CONDITIONS OF APPROVAL, IF ANY: