STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	Ι.		
DISTRIBUTION			
BANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
OPERATOR			

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

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OIL CONSERVATION DIVISION

MAR 1 1 1986

DISTRIBUTION	P. O. BOX 2088	Form C-103 Revised 10-1-78
SANTA FE	SANTA FE, NEW MEXICO 87501	KE11268 12-1-10
FILE	- - 	5a. Indicate Type of Lease
U.S.G.S.		State X Fee
OPERATOR	 .	5. State Oil & Gas Lease No.
		B-1520
SI	JNDRY NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM F	JINDR I IND FICED MIND REFOR 13 UN MELLS OR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. PLICATION FOR PERMIT —" (FORM C-101) FOR SUCH PROPOSALS.)	
	Transfer For Fermina (Volum C-1971) For 300 in Proposition,	7. Unit Agreement Name
01L	OTHER Water Injection Woll	
Name of Operator	J OTHER- Water Injection Well	E. Farm or Lease Name
Mobil Producing T	/ P NIM Tho	
Address of Operator	. a we me.	Bridges State
	Cuit- 0700 U1 TV 77040	
	Suite 2700, Houston, TX 77046	63
Location of Well	·	10. Field and Pool, or Wildcat
UNIT LETTERK	. 1980 FEET FROM THE South LINE AND 1980 FEET FR	Vacuum Grayburg - SA
THE West LINE.	SECTION 13 TOWNSHIP 17S RANGE 34F NMP	
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
		Iea (
. Cr	and Appropriate Pay To Indiana Natura of Nation Page of	
	eck Appropriate Box To Indicate Nature of Notice, Report of C	
NOTICE	OF INTENTION TO: SUBSEQUE	NT REPORT OF:
EAFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
EMPORABILY ABANDON	COMMENCE DRILLING OPHS.	PLUG AND ABANDONMENT
ULL OR ALTER CASINS	CHANGE PLANS CASING TEST AND CEMENT JOB	
	other Repair the 1	eak
91HT#		
		
 Describe Proposed or Comple work) SEE BULE 1103. 	sted Operations (Clearly state all pertinent details, and give pertinent dates, including	ing estimated date of starting any proposed
11 06 05 4704 5		
11-26-85 MIR V Pe	ermian WS, POH w/ tbg, tbg parted 3110' from surf, P	POH w/ all tbg.
	·	-
44 07 05		•
11-27-85 RIH W/	pkr on 134jts tbg, set pkr @ 4127, Test pkr - ok. R	Returned to Injection
		· ·
	•	
		·
. I hereby certify that the inform	nation above is true and complete to the best of my knowledge and belief.	
14		
Mana	La min	3-6-86
HED	Authorized Agent	DATE