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NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-1311
7. Unit Agreement Name
8. Farm or Lease Name New Mexico "B"
9. Well No. 5
10. Field and Pool, or Wildcat Mescalero Devonian
12. County Lea

SUNDY 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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator
Mobil Oil Corporation

Address of Operator
Box 633, Midland, Texas 79701

Location of Well
UNIT LETTER H 1014 FEET FROM THE East LINE AND 1982 FEET FROM
THE North LINE, SECTION 27 TOWNSHIP 10-S RANGE 32-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
4341 GR

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <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.

Temporarily abandoned 10-1-75.

Hold for study for workover.

Expires 10-1-76

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

SIGNED <u>[Signature]</u>	TITLE <u>Authorized Agent</u>	DATE <u>10-14-75</u>
APPROVED BY <u>[Signature]</u>	TITLE <u>Supervisor</u>	DATE <u>OCT 21 1975</u>
CONDITIONS OF APPROVAL, IF ANY:		