NO. OF COPIES RECEIVE	D C	Form C-103
DISTRIBUTION		Supersedes Old
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE		
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State X Fee.
OPERATOR		5. State Oil & Gas Lease No.
		B-1520
	SUNDRY NOTICES AND REPORTS ON WELLS	mmmilinimmk
(DO NOT USE TH	SUNDRY NOTICES AND REPORTS ON WELLS IS 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.	Talling Control Sound Proposition	7. Unit Agreement Name
OIL X	GAS WELL OTHER-	
2. Name of Operator		8. Farm or Lease Name
Mobil 011 C	orporation	Pridges State
3. Address of Operator		Bridges State 9. Well No.
P. O. Box 6	33, Midland, Texas 79701	147
4. Location of Well	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	147 10. Field and Pool, or Wildcat
UNIT LETTERF	. 2180 FEET FROM THE North LINE AND 1880 FEET FROM	1312
	FEET FROM THE HOLLINE AND 1000 FEET FROM	THE PROPERTY OF THE PARTY OF TH
THE West	LINE, SECTION 13 TOWNSHIP 17-S RANGE 34-E NMPM	
	LINE, SECTION TO TOWNSHIP 17-3 RANGE 34-E NMPM	
	15, Elevation (Show whether DF, RT, GR, etc.)	12. County
	4017 GR	Lea
16.	Check Appropriate Box To Indicate Nature of Notice, Report or Ot	
N	TICE OF INTENTION TO	
	SUBSEQUEN	T REPORT OF:
PERFORM REMEDIAL WOR	PLUG AND ABANDON REMEDIAL WORK	
		ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	
ATUE 5	OTHER	
OTHER		
7. Describe Proposed o	or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including	actimated data of static
work) SEE RULE 1	103.	estimated date of starting any proposed
Dodd Ca-	L . 49 AM	
Bridges Sta	Te #14/	
0.43.0	B 310 to 2001 a 200 mg	
8/10	Ran 118 jts. 5000' 9-5/8 N80 and S95 csg, cemented on	
	bottom @ 5000' by Howco w/2700x Class C 6% gel cement	
	w/1/4# flocele in 1st 300x + 200x Class C Neat cement.	. PD
	0 1:50 a.m. 8/9/70, cement circ, NU 9-5/8 csg, inst'l	BOP's
	now testing BOP's. WOC 18 hrs.	
8/11	(19) 5192 drlg. lm, 8-3/4" hole, NND. Fr wtr.	
-,	15 add 1. hrs. testing BOP's and 9-5/8 csg. tested csg	
	w/2000#/30 min/ok.	•
	W LOODE SO MITHOR.	
8. I hereby certify that	the information above is true and complete to the best of my knowledge and belief.	
1 / /		
\ \ \ \ \	ACIN Paris	
IGNED	What Authorized Agent	DATE 8-17-70
	0. 1/1/10	
Xn	1' VI 16/10 +	
PPROVED BY	10/10 (XXIIIXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	DATE
ONDITIONS OF APPR	OVÂL, IF ANY:	