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O. C. D.

ARTESIA, OFF

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

NM OIL CONS. COMMISS.

Drawer DD

Artesia, NM 88210

Form Approved.

Budget Bureau No 42-R1424

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 Form 9-331-C for such proposals.)

1. ☐ oil well ☐ gas well ☐ other Water Injection Well

2. NAME OF OPERATOR
Mobil Producing TX & NM Inc. ✓

3. ADDRESS OF OPERATOR
9 Greenway Pl-Ste 2700, Houston, TX 77046

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 990 FSL & 330 FWL

AT TOP PROD. INTERVAL: Same as surface

AT TOTAL DEPTH: Same as surface

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON* ☐

(other) Temporary Abandonment

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

This well was shut in 1-23-84.

Request one year extension of authority to retain this well in a temporarily abandoned state pending P&A.

APPROVED FOR 12 MONTH PERIOD

ENDING 3/15/86

5. LEASE
LC-069465

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

West Henshaw Premier Unit Tract 5

9. WELL NO.

3

10. FIELD OR WILDCAT NAME

Henshaw-Grayburg, West

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 3, T-16S, R-30E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3842 GR, 3844 DF

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED

Nancy Lewis

TITLE

Authorized Agent

DATE

3-11-85

(This space for Federal or State office use)

APPROVED BY

TITLE

CARLOS

DATE

3-26-85

CONDITIONS OF APPROVAL IF ANY:

*See Instructions on Reverse Side

Subject to
Like Approval
by State

45P