

c/sf

RECEIVED BY

APR -4 1985

O. C. D. SUNDY  
ARTESIA OFFICEUNITED STATES NM OIL CONS. COMMISSION  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY Artesia, NM 88210

## NOTICES AND REPORTS ON WELLS

LC 069465  
10. IF INDIAN, ALLOTTEE OR TRIBE NAME7. UNIT AGREEMENT NAME  
West Henshaw Premier Unit Tr. 5

8. FARM OR LEASE NAME

9. WELL NO.  
610. FIELD OR WILDCAT NAME  
Henshaw Grayburg, West

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

Sec 10, T16S, R30E

12. COUNTY OR PARISH 13. STATE  
Eddy New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3852' CL

1. oil ☒ gas ☐ other ☐

2. NAME OF OPERATOR

Mobil Producing TX &amp; NM Inc ✓

3. ADDRESS OF OPERATOR

9 Greenway Plaza, Ste 2700, Houston TX 77046

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

AT SURFACE: 330 FNL &amp; 2308 FEL

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 ☐SHOOY OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON\* ☐(other) Temporary Abandonment ☒

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

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 temporarily abandoned 4-28-83; uneconomical to produce.

On 2-5-85 a 12 month extension to maintain a temporarily abandoned status was approved upon completion of a satisfactory well test. This is notification that this well will be either recompleted or plugged and abandoned within the next 2 to 3 months.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Nancy L. Lusk TITLE Authorized Agent DATE 3-22-85

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL IF ANY

APR 2 1985

\*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO