DISTRIBUTION SANTA FE NEW MEXICO OIL CONSERVATION COMMISSION FILE U.S.G.S.	Form C-103 Supersedes Old C-102 and C-103 Effective 1-1-65 Sq. Indicate Type of Lease
LAND OFFICE OPERATOR 2	State X Fee. 5. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS	E-5300
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO BRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. 1.	7. Unit Agreement Name
other. Water Injection 2. Name of Operator	77. Out Agreement Name
Mobil Gil Corporation 3. Address of Operator	8. Form of Lease Name Northeast Square Lake Premier Unit
P.O. Box 633, Midland, Texas 79701	9. Well No. 8
4. Location of Well UNIT LETTER U . 660 FEET FROM THE South LINE AND 660 FEET FROM	10 Field and Pool, or Wildeat Square Lake Grayburg San Andres, North
THE West LINE, SECTION 2 TOWNSHIP 16S RANGE 31E NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.) 4405 GR	12. County Eddy
Check Appropriate Box To Indicate Nature of Notice, Report or Oth NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK TEMPORABILY ABANDON PULL OR ALTER CASING 17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including of the property of the Water Injection. 4100 TD, 4075 PBTD. Premier in 5/4/67 MIRU DA&S Well Ser Co SD Unit 5/5/67 Pulled & warehoused 100 5/8" & 56 3/4" rods & pump, tab bottom jts, 2-3/8" tbg, ran 3½" SP C/O 3981 to 4004 in 7 hrs. 5/8/67 Ran 1-3/4" bit & csg scraper on 2-3/8 tbg to 4004', pulled & 1 and bit. 5/8/67 Ran plastic coated 5½" Johnston type 101-S tension pkr on 128 2-3/8" cement lined tbg. Set pkr @ 3925 w/ 13,000# tension, if rig down & released DA&S well Ser Unit @ 12:00 noon. Complete as Water Injection.	ALTERING CASING PLUG AND ABANDONMENT Injection Estimated date of starting any proposed perfs (3964-3972). In w/ tbg pulled 106 Layed down tbg scraper its
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16. I hereby certify that the information above is true and complete to the best of my knowledge and belief.	

APPROVED BY K. // Comment

CIL AND GAS INSPECTOR

CONDITIONS OF APPROVAL, IF ANY:

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