

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Indicate number of
copies on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

458

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER

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

3. ADDRESS OF OPERATOR
9 Greenway Plaza, Suite 2700, Houston, TX 77046

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
560 FSL & 1980 FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DT, ST, OR, etc.)

RECEIVED BY
AUG 20 1986
O. C. D.
TX 77046

5. LEASE DESIGNATION AND SERIAL NO.
NM - 04421

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Northeast Square Lake
Premier Unit

9. WELL NO.
6

10. FIELD AND POOL, OR WILDCAT
North Square Lake G-SA

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Sec. 3, T-16S, R-31E

12. COUNTY OR PARISH
Eddy

13. STATE
NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☐
FRACTURE TREAT	☐	FRACTURE TREATMENT	☐
BROOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other) Temporary Abandon	☒	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and 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 5-6-86; uneconomical to produce.
Request authority to temporarily abandon this well.

APPROVED FOR 12 MONTH PERIOD
ENDING 8/18/87

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

SIGNED Nancy Lewis TITLE Authorized Agent DATE 8-1-86

(This space for Federal or State office use)
Orig. Sec. 1001-1002

APPROVED BY John R. Smith TITLE _____ DATE 8-19-86

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side