

Form Approved.  
Budget Bureau No. 42-R1424

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

## 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 ☐
2. NAME OF OPERATOR  
Mobil Producing TX & NM, Inc. ✓
3. ADDRESS OF OPERATOR 77046  
9 Greenway Plaza, Ste. 2700, Houston, TX
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 2310' FSL & 1980' FEL  
AT TOP PROD. INTERVAL: Same as surface  
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

- | REQUEST FOR APPROVAL TO:     | SUBSEQUENT REPORT OF:    |
|------------------------------|--------------------------|
| TEST WATER SHUT-OFF          | <input type="checkbox"/> |
| FRACTURE TREAT               | <input type="checkbox"/> |
| SHOOT OR ACIDIZE             | <input type="checkbox"/> |
| REPAIR WELL                  | <input type="checkbox"/> |
| PULL OR ALTER CASING         | <input type="checkbox"/> |
| MULTIPLE COMPLETE            | <input type="checkbox"/> |
| CHANGE ZONES                 | <input type="checkbox"/> |
| ABANDON*                     | <input type="checkbox"/> |
| (other) *TEMPORARILY ABANDON |                          |

- |   |                 |
|---|-----------------|
| 5. LEASE<br>PM 04421  |                 |
| 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                    |                 |
| 7. UNIT AGREEMENT NAME<br>N.E. Square Lake Premier Unit                 |                 |
| 8. FARM OR LEASE NAME   |                 |
| 9. WELL NO.<br>26   |                 |
| 10. FIELD OR WILDCAT NAME<br>Square Lake G-SA, North                    |                 |
| 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Sec. 10, T16S, R31E |                 |
| 12. COUNTY OR PARISH<br>Eddy  | 13. STATE<br>NM |
| 14. API NO.   |                 |
| 15. ELEVATIONS (SHOW DF, KDB, AND WD)<br>4230' GL                       |                 |

(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 6/1/83; uneconomical to produce. Request permission to hold in TA'd status for an additional year.

APPROVED FOR 12 MONTH PERIOD

## ENDING

ENDING 21.1.86  
Upon the completion of a satisfactory well test.

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

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

SIGNED Gloria Howard TITLE Authorized Agent DATE 11/28/84

(This space for Federal or State office use)

APPROVED BY Mark N.  
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

FEB 26 1985

OFFICE  
HONORARY OFFICE