

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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

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 ☐		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR Mobil Producing TX & NM Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 9 Greenway Plaza, Suite 2700, Houston, TX 77046		7. UNIT AGREEMENT NAME Lindrith "B" Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with applicable State requirements. See also space 17 below.) At surface 1850 FSL & FWL		8. FARM OR LEASE NAME	
14. PERMIT NO.		9. WELL NO. 38	
15. ELEVATIONS (Show whether GR - 7180)		10. FIELD AND POOL, OR WILDCAT Undesignated - Gallup	
BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA		11. SEC., T., R., N., OR BLE. AND SURVEY OF AREA Sec. 4, T24N, R2W	
		12. COUNTY OR PARISH Rio Arriba	
		13. STATE NM	

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NOV 27 1985

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	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other) Casing	☒
(Other)	☐	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
PULL OR ALTER CASING	☐	REPAIRING WELL	☐
MULTIPLE COMPLETE	☐	ALTERING CASING	☐
ABANDON*	☐	ABANDONMENT*	☐
CHANGE PLANE	☐		

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.)

11-17/18-85 Drlg

11-19-85 TD 12 1/4" hole, RIH w/80 jts 8-5/8" 24# S80 ST&C csg, cmt on btm @ 3425 w/1500 x TLW + 100x 1-1 Talc + 100x C1 B (2958 cf), circ 150x, 12% HWO.

11-20-85 WOC 18 hrs, test csg 1000#/20 min/OK, Drlg new form

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DEC 03 1985
OIL CON. DIV.
DIST. 3

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

SIGNED Nancy Lewis

TITLE Authorized Agent

DATE 11-25-85

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE 11-25-85

*See Instructions on Reverse Side