

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-039-25168
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. NA
7. Lease Name or Unit Agreement Name MILLER COM
8. Well No. 1
9. Pool name or Wildcat LINDRITH DAKOTA EXT.

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"
(FORM C-101) FOR SUCH PROPOSALS.)

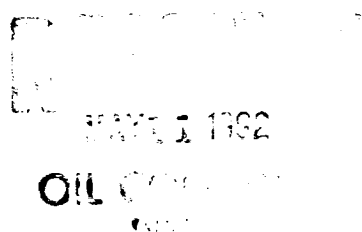
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator MOBIL PRODUCING TEXAS & NEW MEXICO, INC.
3. Address of Operator P O BOX 633 MIDLAND, TX 79702	4. Well Location Unit Letter <u>G</u> : <u>1835</u> Feet From The <u>NORTH</u> Line and <u>1990</u> Feet From The <u>EAST</u> Line Section <u>17</u> Township <u>24N</u> Range <u>2W</u> NMPM RIO ARRIBA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 7163	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

4-28-92 SPUD WELL 4-28-92 DRILLED 17 1/2 HOLE
CIRC. & COND. HOLE. CMT SHOE @ 460' W/550 SKS CLASS G
15.8 PPG 1.15 YLD SLURRY). DISP W/66.5 BBLS FW. GOOD
CUT OFF 13 3/8 CSG. WELD ON SURF HEAD TEST TO 750 PSI

4-29-92 RIH W/13 3/8 48# H-40 ST&C CSG. 6 CENT.
CMT. 2% CACL2 W/.25#/SK D-29 (113 BBLS
RETURNS THRU JOB. CIRC 195 SKS TO SURF.
HELD OK. NU BOP.



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Shirley Todd TITLE ENV. & REG. TECHNICIAN DATE 5-5-92
TYPE OR PRINT NAME SHIRLEY TODD TELEPHONE NO. 915-688-2585

(This space for State Use)

APPROVED BY Original Signed by FRANK T. CHAVEZ TITLE SUPERVISOR DISTRICT # 3 DATE MAY 11 1992
CONDITIONS OF APPROVAL, IF ANY: