

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other instructions
verse side)

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

8. LEASE DESIGNATION AND SERIAL NO.

USA-NM-0554967

9. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Government "K"

9. WELL NO.

2

10. FIELD AND POOL OR WILDCAT

Querecho Plains
Upper Bone Spring

11. SEC., T., R., M., OR B.L. AND
SURVEY OR AREA

Sec. 23, T-18S, R-32E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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

1950 FSL & 1980 FWL

16. PERMIT NO.

15. ELEVATIONS (Show whether DF, ST, GR, etc.)

GR-3770

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PLUG OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) spud

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

9/17-18/86 MIRU Moranco Rig #10

9/19/86 SPUD 17½ hole, drlg.

9/20/86 TD 17½ hole, RIH w/17 jts 13-3/8 48#
H40 w/7 centL, cmt @ 700 w/700 sx cl C, circ 190 sx, HWO 16%,
WOC, Job witnessed by Walter Cox, BLM-Hobbs

9/21/86 WOC 18 hrs, Tst csg 600# - 30 min - ok, drlg new form

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

SIGNED

Nancy Lewis

TITLE

Authorized Agent

DATE

9-29-86

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

OCT 03 1986

*See Instructions on Reverse Side