

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised March 25, 1999

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240
DISTRICT II
811 South First, Artesia NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410
DISTRICT IV
2040 South Pacheco, Sante Fe, NM 87505

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

WELL API NO. 30-025-23980
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 8055
7. Lease Name or Unit Agreement Name North Vacuum Abo Unit
8. Well No. 170
9. Pool name or Wildcat Vacuum;Abo, North
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4037' GR

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 type="checkbox"/> Gas Well <input type="checkbox"/> Other Injection
2. Name of Operator Mobil Producing TX & NM, Inc.
3. Address of Operator P. O. Box 4358 Houston TX 77210-4358
4. Well Location Unit Letter D : 660 Feet From The North Line and 740 Feet From The West Line Section 14 Township 17S Range 34E NMPH Lea County

10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4037' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

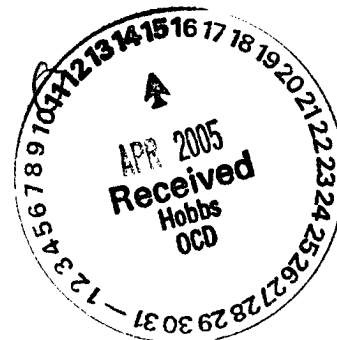
SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG & ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: **TA status extension** ☒

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. (For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion)

We would like to extend our temporary abandonment status for this well. An MIT was performed on 04-01-05 and witnessed by state representative Bo Hill. Chart is attached.

This Approval of Temporary
Abandonment Expires **4/1/10**



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

SIGNATURE Tiffany A. Stebbins TITLE Staff Office Assistant DATE 04/07/2005
TYPE OR PRINT NAME Tiffany A. Stebbins TELEPHONE NO. (281) 654-1936

(This space for State Use)

APPROVED BY Harry W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE _____
CONDITIONS OF APPROVAL IF ANY:

APR 11 2005

