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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator <i>Mobil Oil Corporation</i>	8. Farm or Lease Name <i>J.C. Maxwell</i>
3. Address of Operator <i>Box 633, Midland, Texas 79701</i>	9. Well No. <i>3</i>
4. Location of Well UNIT LETTER <i>I</i> , <i>1980</i> FEET FROM THE <i>South</i> LINE AND <i>660</i> FEET FROM THE <i>East</i> LINE, SECTION <i>27</i> TOWNSHIP <i>14-S</i> RANGE <i>37-E</i> NMPM.	10. Field and Pool, or Wildcat <i>Denton Devonian</i>
15. Elevation (Show whether DF, RT, GR, etc.) <i>3821'GR</i>	12. County <i>Lea</i>

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☒
CHANGE PLANS ☐
OTHER ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
OTHER ☐

17. 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.

PROCEDURE

1. LOAD HOLE WITH MUD LADEN FLUID. Check old plug.
2. SET A 10 SACK CEMENT PLUG AT THE SURFACE & INSTALL MARKER.
3. CLEAN UP LOCATION

NOTE: VERBAL O.K. ON THIS PROCEDURE FROM JOE RAMEY
OF NMOC 11-25-68.

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

SIGNED *COM* TITLE *Authorized Agent* DATE *12-19-68*

APPROVED BY *John W. Rungen* TITLE DATE
CONDITIONS OF APPROVAL, IF ANY: