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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 checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5b. 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 Mobil Oil Corporation | | 8. Farm or Lease Name J. C. Maxwell |
| 3. Address of Operator P. O. Box 633, Midland, Texas 79701 | | 9. Well No. 7 |
| 4. Location of Well UNIT LETTER <u>A</u> <u>990</u> FEET FROM THE <u>North</u> LINE AND <u>330</u> FEET FROM <u>East</u> <u>27</u> TOWNSHIP <u>14-S</u> RANGE <u>37-E</u> NMPM. THE LINE, SECTION TOWNSHIP RANGE NMPM. | | 10. Field and Pool, or Wildcat Denton |
| 15. Elevation (Show whether DF, RT, GR, etc.) 3820 Gr. | | 12. County Lea |

| | | |
|--|---|---|
| 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data | | |
| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK <input checked="" type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | OTHER <input type="checkbox"/> | CASING TEST AND CEMENT JOB <input type="checkbox"/> |
| OTHER <u>Recomplete</u> | | OTHER <input type="checkbox"/> |

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.

Objective: Plug Dev. and Recomplete in the Penn. Formation

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

| | | |
|---------------------------------|-------------------------------|---------------------|
| SIGNED <u>[Signature]</u> | TITLE <u>Authorized Agent</u> | DATE <u>1-10-68</u> |
| APPROVED BY <u>[Signature]</u> | TITLE _____ | DATE _____ |
| CONDITIONS OF APPROVAL, IF ANY: | | |

Recomplete in Penn. Formation