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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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>Water Injection</u>		7. Unit Agreement Name
2. Name of Operator <u>Mobil Oil Corporation</u>		8. Farm or Lease Name <u>Denton No. Wolfcamp Unit Tract 6.</u>
3. Address of Operator <u>P. O. Box 633, Midland, Texas 79701</u>		9. Well No. <u>27</u>
4. Location of Well UNIT LETTER <u>G</u> <u>1,980</u> FEET FROM THE <u>North</u> LINE AND <u>2,180</u> FEET FROM THE <u>East</u> LINE, SECTION <u>35</u> TOWNSHIP <u>14-S</u> RANGE <u>37-E</u> NMPM.		10. Field and Pool, or Wildcat <u>Denton Wolfcamp</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3,805 GR</u>		12. County <u>Lea</u>

### 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
		OTHER <u>Converted to Water Injection</u> <input checked="" type="checkbox"/>	
		<u>Order WFX 325, Dated 10-31-69</u>	

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.

See Completed Operations Attached.

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>1-26-70</u>
APPROVED BY <u>[Signature]</u>	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		