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NEW MEXICO OIL CONSERVATION COMMISSION

AUG 17 11:49 AM '67

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"/>

5. State Oil & Gas Lease No.

E-1520

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 bridges State
3. Address of Operator P. O. Box 633, Midland, Texas 79701	9. Well No. UNDESIGNATED
4. Location of Well UNIT LETTER <u>0</u> , <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>1200</u> FEET FROM THE <u>East</u> LINE, SECTION <u>34</u> TOWNSHIP <u>16-S</u> RANGE <u>34-E</u> NMPM.	10. Field and Pool, or Wildcat North Vac um Lower Wolfcamp.
15. Elevation (Show whether DF, RT, GR, etc.) 4068.1 GR	12. County Lea

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

NOTICE OF INTENTION TO:

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

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER Acidizing ☒
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

8/10 - BJ Serv Acidized perfs (10,685 - 10,734) w/ 3000 gals 15% NE acid using 20
RCM ball sealers down 2-3/8 tbg, BDTP 3500, TTP 4500-0, rate 3.5 BPM, ISIP- Vac,
Job compl 12:04 p.m. 8/10/67

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

SIGNED John F. Duro TITLE Authorized Agent DATE 8/15/67

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: