

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

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

WELL API NO.

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. 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. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator
Mobil Producing Tx. & N.M. Inc.*

8. Well No.
91

3. Address of Operator *Mobil Exploration & Producing U.S. Inc., as Agent for
Mobil Producing TX. & N.M. Inc., P. O. Box 633, Midland, TX 79702

9. Pool name or Wildcat
VACUUM GRAYBURG SAN ANDRES

4. Well Location
Unit Letter I : 1650 Feet From The SOUTH Line and 330 Feet From The EAST Line

Section 3 Township 17S Range 34E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4055 GL 4067 KB

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

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☒ REMEDIAL WORK ☐ ALTERING CASING ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐ CASING TEST AND CEMENT JOB ☐
OTHER: ☐ OTHER: ☐

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.

1. MIRU MAYO MARRS. ND WH. POH W/RODS & PUMP. NU BOP, POH W/TBG. LD SAME.
2. RIH W/CIBP FOR 5-1/2 14# CASING ON 2-3/8 WS. SET CIBP @ 4600 AND CAP W/35 CMT ON TOP. PU WS TO 4000 FT. WOC.
3. RIH W/WS TO 4550. CIRC WELLBORE W/10 PPG GELLED BRINE. PU WS TO 1750.
4. RU CMT SERVICES. SPOT A PLUG OF 21 SX CMT FROM 1750 TO 1550 ACROSS BASE OF 8-5/8 CSG AND TOP OF SALT AT 1600 FT. DISPLACE TBG W/6 BBLS 10 PPG GELLED BRINE. PU TBG AND WOC 8 HRS. TAG CMT PLUG TOP AT 1550' PU TBG TO 50.
5. SPOT 5 SX (50 FT) TO SURFACE. POH W/WS. WOC. MAKE SURE CMT IS AT TOP OF PIPE.
6. ND BOP. RD PU. CUT CASING 3 BELOW GROUND LEVEL. WELL A STEEL PLAT ON CASING STUB. ERRECT P&A MARKER W/WELL NAME AND PLUGGED DATE. FILL CELLAR AND CLEAN SURFACE LOCATION.

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

SIGNATURE J. W. Dixon TITLE Engineering Technician DATE 4/5/91
(915)
TYPE OR PRINT NAME J. W. DIXON TELEPHONE NO. 688-2452

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE 4-5-91
CONDITIONS OF APPROVAL, IF ANY: _____

NO CHANGE SINCE LAST EXAMINATION IN
RECORD TO THE RECORDING OF
RECORDING OPERATIONS FOR THE CLOS
TO BE APPROVED