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

O. CONSERVATION DIVISION

P.O. BOX 1980, HOOSE, NM 88240 DISTRICT II	P.O. Box 2088		WELL API NO.
P.O. Drawer DD, Artesia, NM \$8210			5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			STATE X FEE 6. State Oil & Gas Lease No.
DIFFERENT RESERV (FORM C-10	ES AND REPORTS ON WE OSALS TO DRILL OR TO DEEPE OIR. USE "APPLICATION FOR PO DI) FOR SUCH PROPOSALS.)	N OR PLUG BACK TO A	B-1520 7. Lease Name or Unit Agreement Name
I. Type of Well: Off GAS WELL WELL	OTHER.		BRIDGES STATE
2. Name of Operator Mobil Producing TX & NM,	Inc.		8. Well No.
P.O. Box 633 Midland, 4. Well Location	Texas 79702		9. Pool same or Wildcat Vacuum Grayburg San Andres
i i	Feet From The North	Line and198	O Feet From The West Line
Section 13	Towaship 17-S	ange 34-E	NMPM Lea County
	10. Elevation (Show whether GL-4021	DF, RKB, RT, GR, etc.)	
11. Check Ap NOTICE OF INTE	opropriate Box to Indicate NTION TO:		eport, or Other Data SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
PULL OR ALTER CASING	_	CASING TEST AND CE	
OTHER:		OTHER:	
12. Describe Proposed or Completed Operation work) SEE RULE 1103.	a (Clearly state all pertinent details, a	nd give pertinent dates, includ	ling estimated date of starting any proposed
MIRU Mayo Marrs. NU BOP SPOT 15sks CLC 4270-4120 SPOT 15 sks CLC 2600-246 SPOT 15 sks CLC 1841-160 SPOT 60 sks CLC 1150-105 SET 50 sks CLC 862-700 SET 15 sks CLC to SURF WELD PLATE + MARKER	O (CAL) O (CAL) O (CAL)	GELLED BRINE	
WELL PA'D 03-01-90			
I hereby certify that the information above in true and	4		
TYPEOR PRINT NAME D.W. Parks, JI	• /	u Regulatory Ted	Chnician 03-05-90 (915) TELEPHONE NO. 688-2548
(This space for State Use)	1		
APPROVED BY			DATE