

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240
DISTRICT II
811 South First, Artesia NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410
DISTRICT IV
2040 South Pacheco, Sante Fe, NM 87505

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

WELL API NO.
30-025-02031

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

B-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)

7. Lease Name or Unit Agreement Name

Bridges State

1. Type of Well:

Oil ☐ Gas ☐ Other **injector**

2. Name of Operator

Mobil Producing TX & NM, Inc.

8. Well No.

37

3. Address of Operator **P. O. Box 4358**

Houston

TX 77210-4358

9. Pool name or Wildcat

Vacuum; Grayburg-San Andres

4. Well Location

Unit Letter **K** : **1980** Feet From The **south** Line and **1980** Feet From The **west** Line

Section **14** Township **17S** Range **34E** NMPH **Lea** County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)

4047 gr

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE ☐
COMPLETION
OTHER: **backflow test** ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG & ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
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. (For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion)

Proposed procedure for backflowing:

HOOK-UP:

Close tubing and injection line valves
Bleed ALL pressure from piping
Install pressure gauge, bleeder valve and choke
Connect valve to choke to piping to tank

DAILY OPERATION: 7:00 AM to 2:00 PM

Open well valve with Choke closed and NOTE tubing pressure and note tank level
Open choke slowly until pressure is stable at half of initial tubing pressure
Flow well to tank for the seven daylight hours
Note tubing pressure and tank level when shutting in well at night
Repeat process for 7 days. Haul liquids to Bridges State Tank Battery as needed

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

SIGNATURE **D. O. Howard** TITLE **Sr. Regulatory Specialist**

DATE **11/05/2001**

TYPE OR PRINT NAME **Dolores O. Howard**

TELEPHONE NO. **(713) 431-1792**

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL IF ANY: