## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

|              | $I_{}$  |  |
|--------------|---------|--|
| DISTRIBUTION |         |  |
| SANTA PE     | $\prod$ |  |
| FILE         |         |  |
| U.S.G.S.     |         |  |
| LAND OFFICE  |         |  |
| OPERATOR     |         |  |

CONDITIONS OF APPROVAL, IF ANY:

|   | OIL CONSER   | · -                  | IVISION                             | Form C-103                              |
|---|--|----------------------|-------------------------------------|---|
| DISTRIBUTION  | P. O. BOX 2088<br>SANTA FE, NEW MEXICO 87501   |                      | Revised 10-1-78                     |   |
| FILE  | SANTA PE, I  | NEW WEXICO           | 8/501                               | Sa. Indicate Type of Lease              |
| U.S.O.S.  |  |                      |                                     | State X Fee                             |
| CAND OFFICE   |  |                      |                                     | 5, State Oi. 6 Gas Lease No.            |
| OPERATOR  | 1  |                      |                                     | B-1520                                  |
| SUNDR   | Y NOTICES AND REPORTS  | ON WELLS             | CRENT RESERVOIR.                    |   |
| 1   | ON FOR PERMIT TO FORM C-101 F  | SR SUCH PROPOSALS.   | )                                   | 7, Unit Agreement Name                  |
| well X well   | 0THEB-   | · · · <u> </u>       | <del> </del>                        |   |
| 2. Name of Operator  Mobil Producing TX & NM Inc.   |  |                      | 8. Form or Lease Hame Bridges-State |   |
| 3. Address of Operator                              |  |                      | 9, Well No.                         |   |
| 9 Greenway Plaza, Sui                               | te 2700, Houston, TX   | 77046                | <del></del>                         | 61                                      |
| 4. Location of Well  Well LETTER                    | 1980 FEET FROM THE   | S LINE AND           | 1980                                | Vacuum G-SA                             |
|   |  |                      |                                     |   |
| THE LINE, SECTIO                                    | DH TOWNSHIP  | 1/5 RANGE            | 34E ##PH                            |   |
|   | 15. Elevation (Show wh   | ether DF, RT, GR,    | eic.)                               | 12. County                              |
|   | 7////  |                      |                                     | Lea                                     |
| Check /   | Appropriate Box To Indica  | ite Nature of N      | •                                   |   |
| NOTICE OF IN  | ITENTION TO:   |                      | SUBSEQUEN                           | T REPORT OF:                            |
| PERFORM REMEDIAL WORK                               | PLUS AND ABANDON   | REMEDIAL W           | 0A X                                | ALTERING CASING                         |
| TEMPOSASILY ASANDON                                 |  |                      | DRILLING OPHS.                      | PLUS AND ABANDONMENT                    |
| PULL DR ALTER CASINS                                | EMANGE PLANS   | OTHER_               | AND CEMENT JOS []                   | Temporary Abandon 📉                     |
| <b>9</b> 7HER                                       |  |                      |                                     |   |
| 17. Describe Proposed or Completed Op               | erations (Clearly state all pertine  | nt details, and give | pertinent dates, including          | estimated date of starting any proposed |
| WORKS SEE RULE 1 103.                               |  |                      |                                     |   |
|   |  |                      |                                     |   |
|   |  |                      |                                     |   |
| Well was shut-in 3/10                               | 0/86: uneconomical to  | produce              |                                     |   |
|   | , and a management of the contract of the cont | produce.             |                                     |   |
| Request authority to                                | retain well in a tem   | porary aband         | lonment status f                    | or one year.                            |
|   |  |                      |                                     |   |
|   |  |                      |                                     |   |
|   | •  | •                    |                                     |   |
|   |  |                      |                                     |   |
|   |  |                      |                                     |   |
|   |  |                      |                                     |   |
|   |  |                      |                                     |   |
|   |  |                      |                                     |   |
|   |  |                      |                                     |   |
| 18. I hereby cer ify that the information           | shove is true and complete to the  | best of my knowled   | ge and belief.                      |   |
| Aller in A man                                      |  |                      | •                                   |   |
| AMAW MAIN   | TITLE  | Authori:             | zed Agent                           | 2-18-87                                 |
| 03101111  |  |                      | <del></del>                         | FFD 0 2 4003                            |
| ORIGINAL SIGNED BY JE  APPROVED BY DISTRICT 1 SUPER |  |                      |                                     | FEB 2 3 1987                            |