State of New Mexico Submit 3 Copies Form C-103 Energy "Ginerals and Natural Resources Department to Appropriate District Office Revised 1-1-89 DISTRICT I OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE X FEE L 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. B - 1520SUNDRY NOTICES AND REPORTS ON WELLS ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: WELL WELL | **BRIDGES STATE** OTHER WIW 2. Name of Operator TX + NM Inc 8. Well No. 93 Mobil Exploration & Producing, U.S., Inc. 3. Address of Operator 9. Pool name or Wildcat P.O. Box 633 Midland, Texas 79702 Vacuum Grayburg San Andres Well Location South 1980 East 1980 Feet From The Unit Letter Line and Feet From The 34-E 3 17**-**S Lea Section Township **NMPM** 10. Elevation (Show whether DF, RKB, RT, GR, etc.) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. 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 CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** 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. MIRU Mayo Marrs. NU BOP. PT CSG TO 300# (OK) RIH W/CIBP @ 4104 SPOT 10 SK CLC (4104-4000 C), CIRC W/100 BBLS GELLED BRINE SPOT 20 SK CLC (1750-1570 C) CIRC 30 SK CLC (350-SURF) ND BOP, CUT CSG HEADS WELD PLATE + MARKER WELL PA'D 02-21-90 nd complete to the best of my knowledge and belief. 02-29-90 Regulatory Technician SIGNATURE (915) D.W. Parks, Jr. TELEPHONE NO.688-2548 TYPE OR PRINT NAME (This space for State Use OIL & GAS INSPECTOR

CONDITIONS OF APPROVAL, IF ANY:

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