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NEW MEXICO OIL CONSERVATION COMMISSION  
APR 11 11 43 AM '67

Form C-103  
Supersedes Old  
C-102 and C-105  
Effective 1-1-65

### SUNDY 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 TO DRILL" FORM C-101 FOR SUCH PROPOSALS.)

|                                                                                                                                                                                                          |  |                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------|
| 1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER                                                                                                    |  | 5a. Indicate Type of Lease<br>State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |
| 2. Name of Operator<br>Mobil Oil Corporation                                                                                                                                                             |  | 6. State Oil & Gas Lease No.<br>B-1520                                                               |
| 3. Address of Operator<br>P. O. Box #633, Midland, Texas 79701                                                                                                                                           |  | 7. Unit Agreement Name                                                                               |
| 4. Location of Well<br>UNIT LETTER <u>E</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>13</u> TOWNSHIP <u>17-S</u> RANGE <u>34-E</u> N.M.P.M. |  | 8. Firm or Lessee Name<br>Bridges State                                                              |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>4033 DF                                                                                                                                                 |  | 9. Well No.<br>107                                                                                   |
| 12. County<br>Lea                                                                                                                                                                                        |  | 10. Field and Pool, or Wildcat                                                                       |

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

|                                                |                                                                                     |
|------------------------------------------------|-------------------------------------------------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/>                                           |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>                                               |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <u>Convert to water injection service</u> <input checked="" type="checkbox"/> |

SUBSEQUENT REPORT OF:

|                                                      |                                               |
|------------------------------------------------------|-----------------------------------------------|
| REMEDIAL WORK <input type="checkbox"/>               | ALTERING CASING <input type="checkbox"/>      |
| COMMENCE DRILLING OPNS. <input type="checkbox"/>     | PLUG AND ABANDONMENT <input type="checkbox"/> |
| CASING TEST AND CEMENT JOBS <input type="checkbox"/> | OTHER <input type="checkbox"/>                |

17. 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.

Pull tubing and clean out. Run 2" C. L. tubing on Pkr. Install injection head and complete as a water injection well.

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

SIGNED [Signature] TITLE Authorized Agent

DATE 4/6/67

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: