

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

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

WELL API NO. 30-025-22101	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. B-1520	
7. Lease Name or Unit Agreement Name North Vacuum Abo Unit	
8. Well No. 121W	
9. Pool name or Wildcat North Vacuum - Abo	

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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Injection	
2. Name of Operator Mobil Producing TX & NM Inc.*	
3. Address of Operator *Mobil Exploration & Producing US Inc. as agent for MPTM, Box 633, Midland, TX 79702	
4. Well Location Unit Letter <u>L</u> : <u>1830</u> Feet From The <u>South</u> Line and <u>760</u> Feet From The <u>West</u> Line Section <u>13</u> Township <u>17S</u> Range <u>34E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. 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: <input 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 JOB <input type="checkbox"/> OTHER: Repair Leak <input checked="" type="checkbox"/>

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.

06-16-93 MIRU. POH with Prod. Tubing
Collar leaking, replaced collar, RIH w/tubing.
Run pressure test to 520# for 30 min. Well rel to production.

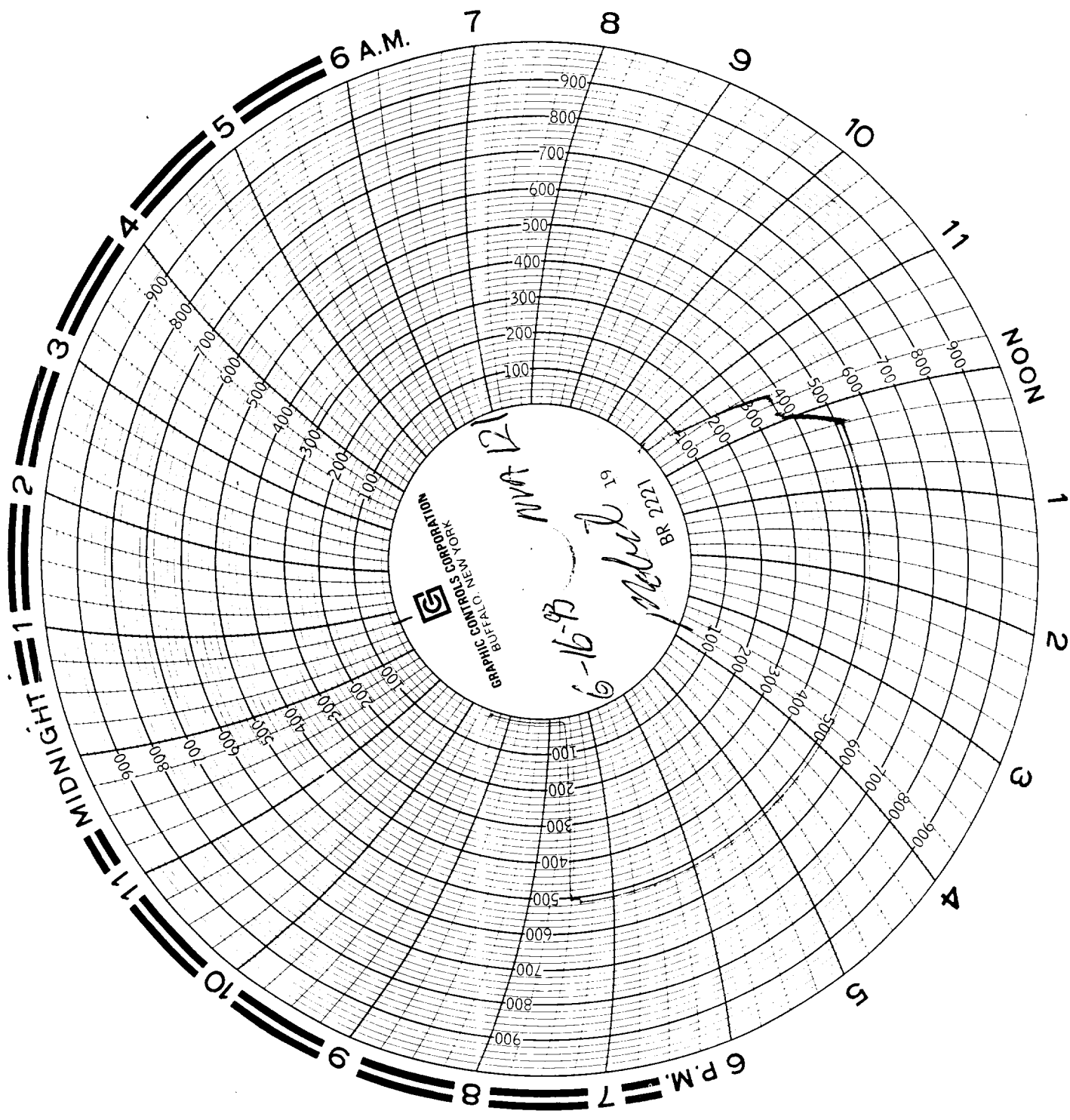
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Kaye Pollock TITLE Regulatory Technician DATE 07-23-93
 TYPE OR PRINT NAME Kaye Pollock TELEPHONE NO. 915-688-2584

(This space for State Use)

APPROVED BY Orig. signed by Paul Kautz Geologist TITLE Geologist DATE JUL 30 1993

CONDITIONS OF APPROVAL, IF ANY:



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

6-16-93
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