

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

WELL API NO. <u>30-025-22344</u>
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. <u>B-1519</u>
7. Lease Name or Unit Agreement Name <u>North Vacuum Abo Unit</u>
8. Well No. <u>230</u>
9. Pool name or Wildcat <u>North Vacuum-Abo</u>

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 ☐ GAS WELL ☐ OTHER WIW

2. Name of Operator
Mobil Producing Tx & N.M. Inc.

3. Address of Operator
Mobil Exploration & Producing U.S. Inc.
P.O. Box 633 Midland, TX 79702

4. Well Location

Unit Letter J : 1830 Feet From The South Line and 2130 Feet From The East Line
Section 13 Township 17-S Range 34-E 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 ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS ☐ PLUG AND 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.

5-22-89 MIRU Permian Rig #40. POH w/31 jts tog.
5-24-89 Found leak in gask.
5-25-89 RIH w/tbg
5-26-89 Set Baker Model C-1 Pkr @ 8287. Press test csg. @ 300=/15 min/OK.
5-27-89 Injection commenced @ 300 BWPD 750# TP 0# CP.

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

SIGNATURE Shirley Todd
TYPE OR PRINT NAME Shirley Todd

TITLE Mobil Exploration & Producing U.S. Inc.
DATE 6-20-89
(915) 688-2585
TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JUN 23 1989