Submit 3 Copies to Appropriate

CONDITIONS OF APPROVAL, IF ANY:

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

District Office	Ellergy, N	Amerais and Natur	ıt	Form C-103 Revised 1-1-89	
DISTRICT I P.O. Box 1980. Hobbs NM 88240	OIL C	ONSERVAT P.O. Box	ION DIVISION	WELL API NO.	
DISTRICT II P.O. Drawer DD. Artesia, NM 882	, <sub>10</sub> S	anta Fe, New Mex		30-025-22526	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 8				5. Indicate Type of Lease ST 6. State Oil & Gas Lease N	ATE X FEE
SUNDRY N	IOTICES AND E	EDODIC ON WE		B-1520	No.
DIFFERENT R	ESERVOIR LISE ".		N OR PLUG BACK TO A	7 Lagga Name - William	
1. Type of Well:	ORM C-101) FOR S	BUCH PROPOSALS.)		7. Lease Name or Unit Ag BRIDGES STATE	reement Name
WELL X GAS WEL	т	OTHER		DUIDGES STATE	
2. Name of Operator  MORIL PRODUCING TYPE				8. Well No.	
MOBIL PRODUCING TX &			PRODUCING	126	
AS AGENT FOR MPTM ,	BOX 633, MIDL	AND, TX 79702		9. Pool name or Wildcat VACUUM MIDDLE F	
4. Well Location Unit Letter J . 19	980 East Ess	TI SOUTH	1000	TACCOM MIDDLE	'ENN
	reet From	n The	Line and 1830	Feet From The EA	AST Line
Section 11	Township	17-8	Range 34-E	NMPM LEA	
		4040.5 GL	ether DF, RKB, RT, GR, etc	c.)	County
Check	Appropriate	Box to Indicat	e Nature of Notice	Report, or Other I	
NOTICE OF	INTENTIO	N TO:	SIIB	Report, or Other I	)ata
PERFORM REMEDIAL WORK	٦		305	SEQUENT REP	ORT OF:
	٦	ND ABANDON	REMEDIAL WORK	X ALTERIA	IG CASING
TEMPORARILY ABANDON	☐ CHANGI	E PLANS	COMMENCE DRILLING	<del></del>	ND ABANDONMENT
PULL OR ALTER CASING			CASING TEST AND CE		10 ) (DAIADOIAINEIA)
OTHER:			OTHER:		_
12. Describe Proposed or Completed	Operations (Clear	ly state all t			
12. Describe Proposed or Completed work) SEE RULE 1103.	operations (Clear	ly state all pertinent d	etails, and give pertinent dat	es, including estimated date o	of starting any proposed
05-07-96 WELL HAS BEEN THE MIDDLE PENN.	N SHUT-IN SINC WELL HAS BEE	e remedial wor 'n put on rood pi	RK IN DECEMBER TO BI UMP BECAUSE IT FAILE	RING BACK ON PRODUC <sup>.</sup> ED TO FLOW.	TION IN
I hereby certify that the information above SIGNATURE	role		te and belief. TLE <b>ENV. &amp; REG. TECH</b>		05-20-96
(This space for State Use) DRIGINA	AL SKANFOR			TELEPHONE N	o. 915)688–1772
	CONTRACTOR				MANAG
APPROVED BY		ידל ?	Ir		MAY 22 1996

\_\_\_\_\_ TITLE \_

\_\_\_\_\_DATE\_