

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                        |  |
|------------------------|--|
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| SANTA FE               |  |
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| LAND OFFICE            |  |
| OPERATOR               |  |

|                                           |                              |
|-------------------------------------------|------------------------------|
| 5a. Indicate Type of Lease                |                              |
| State <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.              |                              |
| B-1520                                    |                              |

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 - 11 (FORM C-101) FOR SUCH PROPOSALS.)

|                                                 |                                   |                                  |
|-------------------------------------------------|-----------------------------------|----------------------------------|
| OIL WELL <input type="checkbox"/>               | GAS WELL <input type="checkbox"/> | OTHER: WIW                       |
| 6. Name of Operator                             |                                   |                                  |
| Mobil Producing TX & NM Inc.                    |                                   |                                  |
| 7. Address of Operator                          |                                   |                                  |
| 9 Greenway Plaza, Suite 2700, Houston, TX 77046 |                                   |                                  |
| 8. Location of Well                             |                                   |                                  |
| UNIT LETTER L                                   | 860                               | FEET FROM THE west LINE AND 1980 |
| THE south                                       | LINE, SECTION 11                  | TOWNSHIP 17-S RANGE 34-E         |

|                                               |
|-----------------------------------------------|
| 7. Unit Agreement Name                        |
| 8. Name of Lease Name                         |
| North Vacuum Abo Unit                         |
| 9. Well No.                                   |
| 135                                           |
| 10. Field and Pool, or Wildcat                |
| North Vacuum - Abo                            |
| 11. Elevation (Show whether DF, RT, GR, etc.) |
| 12. County                                    |
| Lea                                           |

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

|                                                |                                           |                                                      |                                               |
|------------------------------------------------|-------------------------------------------|------------------------------------------------------|-----------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input checked="" type="checkbox"/>    | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPER. <input type="checkbox"/>     | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOBS <input type="checkbox"/> |                                               |

7. 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.)

2/3/87 MIRU X-Pert WS. PT 2-3/8" tbg w/5000=/30 min/ok.

2/4/87 14 hr inj tbg press 3000#, CP-0= - no wtr f 10 fr annl - press test 5 1/2" csg & pkr to 300=/30 min/ok. Rd & Rel X-Pert WS & turned well back to injection status

2/5/87 Final Injection Rate: 96 BWPD; TP-1700#; CP-0=

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

|                                 |                             |                  |
|---------------------------------|-----------------------------|------------------|
| SIGNED <u>[Signature]</u>       | TITLE Authorized Agent      | DATE 2-18-87     |
| APPROVED BY <u>[Signature]</u>  | TITLE DISTRICT I SUPERVISOR | DATE FEB 23 1987 |
| CONDITIONS OF APPROVAL, IF ANY: |                             |                  |