NO. OF COPIES RECEIVED				Form C-	103	
DISTRIBUTION				Supersec	Supersedes Old C-102 and C-103	
SANTA FE	NEW MEXICO	OIL CONSERVATION	ON COMMISSION	Effectiv		
FILE U.S.G.S.				F		
LAND OFFICE				State X	Type of Lease	
OPERATOR					& Gas Lease No.	
				0, 5,5,5	d Gas Eadse .10.	
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.)						
I. OIL X GAS WELL X WELL	OTHER-				ement Name	
Mobil Oil Corporation				8. Farm or I	ease Name	
riodil oil corporation  ∴ Address of Operator			North V	North Vacuum Abo Unit		
Three Greenway Plaza East, Suite 800, Houston, Texas 77046				9. Well No. 142		
4. Location of Well					10. Field and Pool, or Willicat	
UNIT LETTER J 1807 South LINE AND 1880 FEET FROM THE				North V	North Vacuum Abo	
THE East LINE, SECTION 14 TOWNSHIP 17-S RANGE 34-E NMPM				_ имрм.		
15. Elevation (Show whether DF, RT, GR, etc.) 4025 GR				12. County Lea		
Check A	ppropriate Box To In		Notice Report		- 1111111111	
NOTICE OF IN	TENTION TO:			QUENT REPORT	05.	
			30202	ACCION NEI ON	<b>О</b> Г.	
PERFORM REMEDIAL WORK	PLUG AND AB	ANDON REMEDIA	L WORK		LTERING CASING	
TEMPORARILY ABANDON		COMMEN	CE DRILLING OPNS.	P	LUG AND ABANDONMENT	
PULL OR ALTER CASING	CHANGE PLAN	5 CASING T	EST AND CEMENT JOB			
OTHER		OTHE		<del></del>		
17. Describe Proposed or Completed Oper work) SEE RULE 1103.	rations (Clearly state all pe	ertinent details, and g	ive pertinent dates, i	ncluding estimated dat	e of starting any proposed	
<ol> <li>Pump 300 gals C-dex d</li> <li>S. I. 48 Hrs.</li> <li>Pump out C-dex and pu</li> <li>Run treating string a</li> <li>Acidize Abo perfs (85 as diverting agent. ducing agent.</li> <li>S. I. 2-4 Hrs.</li> <li>Pull treating equipme</li> <li>Run production equipme</li> </ol>	all production equal part of the set of the	uipment ing pkr @ 850 W/7500 gals 1 Acid should c	.5% NE iron s contain 1% re	tabilized HCl tarder + 3 gal	using 30 RCNBS 1/100 friction re	
NOTE: Check acid and add				production.		
16. I hereby certify that the information at	Dave is true and complete to	o the best of my know!	ledge and belief.			
	and the trial complete to					
cioned Canal Sinderine	CKL		ized Agent	DATE (c	<i>:2/:22</i>	
CIONED COME STOREGIA			ized Agent	DATE <u>(</u>	-27-22 4 1 47 <b>7</b>	
	d by		ized Agent	DATE C	1 477	