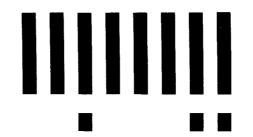
## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION				
BANTA PE				
FILE				
V.1.0.1.				
LAND OFFICE				
0010100				

## OIL CONSERVATION DIVISION

PILE U.S.O.S.	SANTA FE, NEW MEXICO 87501	
		Sa. Indicate Type of Lease
LAND OFFICE		State X Fee 5. State Oil & Gas Lease No.
OFERATOR		B-1520
SUNDRY NOTIC	ES AND REPORTS ON WELLS	
WE BOT WEE THIS FORM FOR PROPOSALS TO D	DAILE ON TO DECPTE OF PLUC BACK TO A DIFFERENT RESERVENCE MIT -" (FORM C-1011 FOR SUCH PROPOSALS.)	7, Unit Agreement Name
OIL GAR OTHER.	7. Unit Agreement Name	
ame al Operator	8. Form or Lease Hame	
Mobil Producing TX & NM Inc.	North Vacuum Abo Uni	
ddress of Operator 9 Greenway Plaza, Suite 2700	O, Houston, TX 77046	169
ocation of Well		10. Field and Pool, or Wildcan
н 1980	North Line And 660	North Vacuum-Abo
East 13	17-S 34-E ·	
	15. Elevation (Show whether DF, RT, GR, asc.)	12. County
	D. T. I. P No (No. in Pres	Lea ///////
Check Appropris	ate Box To Indicate Nature of Notice, Repo	EQUENT REPORT OF:
_		
FORM SCHEDIAL WORK	PLUE AND ABANDON	ALTERING CASIDS
	CHANGE PLANS CASING YEST AND CEMENT AND	PLUS AND ABANDONMENT
L OR ALTER CASING	OTHER	
erate	D'	
Describe Proposed or Completed Operations //	Clearly state all pertinent details, and give pertinent dates	including estimated date of starting any propos
work) SEE RULE 1 fos.		
The above well casinghead wa	as dug out and inspected and	
approved by Jack Griffin (NM		
	•	
	• .	
·		
	·	
•		
•		
I hereby cer ify that the information above is t	true and complete to the best of my knowledge and belief.  Mobil Exploration & Prod	ucing U.S. Inc.
I hereby certly that the information above is t	Mobil Exploration & Producing and pelicity a	







**Job** separation sheet

HO. OF COPIES RECEIVED						
DISTRIBUTION			1			
SANTA FE						
FILE						
U.S.G.S.						
LAND OFFICE						
TRANSPORTER	OIL					
	GAS					
OPERATOR						
PRORATION OFFICE						
Operator						
Mobil Producing Texas						
Address						
9 Greenway Plaza Sui						

VI.

## NEW MEXICO OIL CONSERVATION COMM

Form C-104

	FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Eliective 1-1-65			
	U.S.G.S.	ALITHOPIZATION TO TR	AND ANSPORT OIL AND NATURAL				
	LAND OFFICE		ANSPORT OIL AND NATURAL	GAS			
	TRANSPORTER OIL						
	GAS						
	PRORATION OFFICE	4					
1.	Operator						
	Mobil Producing Texas & New Mexico Inc.						
	Address	Address					
	9 Greenway Plaza, Suite 2700, Houston, TX 77046						
	Reason(s) for filing (Check proper box		Other (Please explain)				
	New We!1	Change in Transporter of:	To change Opera	ator name from Mobil Oil			
	Recompletion Change in Ownership	Oil Dry Go Casinghead Gas Conde	= corporation.				
	Change in Ownership	CdsInghedd Gds Conde	(Effective Date: 1-1-1980)				
	If change of ownership give name						
	and address of previous owner						
11.	DESCRIPTION OF WELL AND	LEASE					
	North Vacuum Aba Wait	Well No. Pool Name, Including F		Ledse No.			
	North Vacuum Abo Unit	169 North Va	.cuum-Abo State, Federa	or Fee State B-1520			
		RO Namel	((0)				
	Unit Letter ; 198	BO Feet From The North Lin	ne and <u>DDU</u> Feet From	The East			
	Line of Section 13Tov	waship 17-S Range	34-E , NMPM,	Lea County			
				Lea county			
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA					
	Name of Authorized Transporter of Oil		Address (Give address to which appro	ved copy of this form is to be sent)			
	N/A - Water Injection	On Well Singhead Gas or Dry Gas	ddress (Give address to which appro				
	, raine of Asimorphis of the	51 217 Gus	Address fifthe dauress to which appro	ved copy of this form is to be sent)			
	I de la	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en			
	If well produces oil or liquids, give location of tanks.						
	If this production is commingled with	th that from any other lease or pool,	give commingling order number	<del></del>			
IV.	COMPLETION DATA		give comminging order number:				
	Designate Type of Completion	On - (X)	New Weil Workover Deepen	Plug Back   Same Resty. Diff. Resty.			
		<del></del>		1			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth			
				. com g Septin			
	Perforations			Depth Casing Shoe			
			D CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE Test must be a	ifter recovery of total volume of load oil	and must be equal to or exceed top allow-			
	OIL WELL	able for this de	epth or be for full 24 hours)	·			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	(t, etc.)			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
				J			
	Actual Prod. During Test	Oil-Bbis.	Water - Bbis.	Gas • MCF			
	GAS WELL			·			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
ļ	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in )	Casing Pressure (Shut-in)	Choke Size			
	, sould manage (pass)	(022-22)	, , , , , , , , , , , , , , , , , , ,	0010 0.120			
VI.	CERTIFICATE OF COMPLIANCE	Œ	OIL CONSERVA	TION COMMISSION			
		, —	1				
	I hereby certify that the rules and r	egulations of the Oil Conservation	APPROVED	, 19			
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Orig. Signed by  Jerry Sexton  Dist 1, Supv.				
P. J. J. 100 Com				form is to be filed in compliance with RULE 1104.			
-	This form is to be filed in compliance with RULE  If this is a request for allowable for a newly drilled  (Signature)  (Signature)  (Signature)  This form is to be filed in compliance with RULE  If this is a request for allowable for a newly drilled  well, this form must be accompanied by a tabulation of  the state taken on the well in accordance with RULE 111.		nied by a tabulation of the deviation				
Authorized Agent			tests taken on the well in accordance with RULE 111.				
•	Authorized (Tite	le)	All sections of this form must be filled out completely for allowable on new and recompleted wells.  Fill out only Sections I. II. III. and VI for changes of owner.				
	October 31						
•	(Date	(e)	well name or number, or transport	er, or other such change of condition.			
			Separate Forms C-104 must	be filed for each pool in multiply			