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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-1520-1	

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name North Vacuum Abo Unit
2. Name of Operator MOBIL PRODUCING TX & NM, INC.	8. Farm or Lease Name
3. Address of Operator Nine Greenway Plaza, Ste. 2700, Houston, TX 77046	9. Well No. 268
4. Location of Well UNIT LETTER <u>I</u> <u>2111</u> FEET FROM THE <u>South</u> LINE AND <u>634</u> FEET FROM THE <u>East</u> LINE, SECTION <u>10</u> TOWNSHIP <u>17 S</u> RANGE <u>34 E</u> NMPM.	10. Field and Pool, or Wildcat North Vacuum Abo
15. Elevation (Show whether DF, RT, GR, etc.) 4048 GL	12. County Lea

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

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☒

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER ☐

17. 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.

12-6-84

Fin 12 1/4" hole @ 10:45 AM 12-6-84, Circ 2 hrs, POH, Ran 8-5/8" Howco type M notched shoe, 1 jt 8-5/8" 32# S80 ST&C 580' w/6 centl, 99 jts 8-5/8" 32# K55 ST&C csg 4378' to 5000', circ 1 hr, Howco cmt 8-5/8" csg on btm @ 5000' w/3500/x Class C + 4% gel + 15# salt/x + 5# Gilsonite/x + 1/4# FC/x + 300/x Class C + 2% CaCl2 + 1/4# FC/x, PD @ 2 AM 12-7-84, Cmt circ 300/x Estm 40% hole wash out, ND BOP & set slips.

12-7-84

Total WOC 18 hrs, Press test BOP & 8-5/8" csg to 2000#, Held OK, Drlg new form @ 9 PM 12-7-84.

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

SIGNED Virginia Shaw TITLE Authorized Agent

DATE 12-18-84

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE _____

DATE JAN - 7 1985

CONDITIONS OF APPROVAL, IF ANY: