

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. NA
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1520
7. Lease Name or Unit Agreement Name BRIDGES STATE
8. Well No. 8
9. Pool name or Wildcat VACUUM (GRAYBURG/SAN ANDRES)
10. Elevation (Show whether DF, RKB, RT, GR, etc.) NA

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. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
2. Name of Operator Mobil Producing Tx. & N.M. Inc.*	
3. Address of Operator *Mobil Exploration & Producing U.S. Inc., as Agent for Mobil Producing TX. & N.M. Inc., P. O. Box 633, Midland, TX 79702	
4. Well Location Unit Letter J : 1980 Feet From The SOUTH Line and 1980 Feet From The EAST Line Section 23 Township 17S Range 34E NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) NA	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: TA Well bore ☒

12. 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.

9/25/91 - PULLED TUBING & PKR & RIH W/BP & SET AT 4200'. RUN TBG BIH, CIRC PKR FLUID,
PRESSURE UP CASING TO 340#- TA WELL.
130 min.

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

SIGNATURE Jerry Dixon TITLE Engineering Technician DATE 10/3/91
TYPE OR PRINT NAME J. W. DIXON (915)
TELEPHONE NO. 688-2452

(This space for State Use)

APPROVED BY JERRY SEXTON
DISTRICT SUPERVISOR

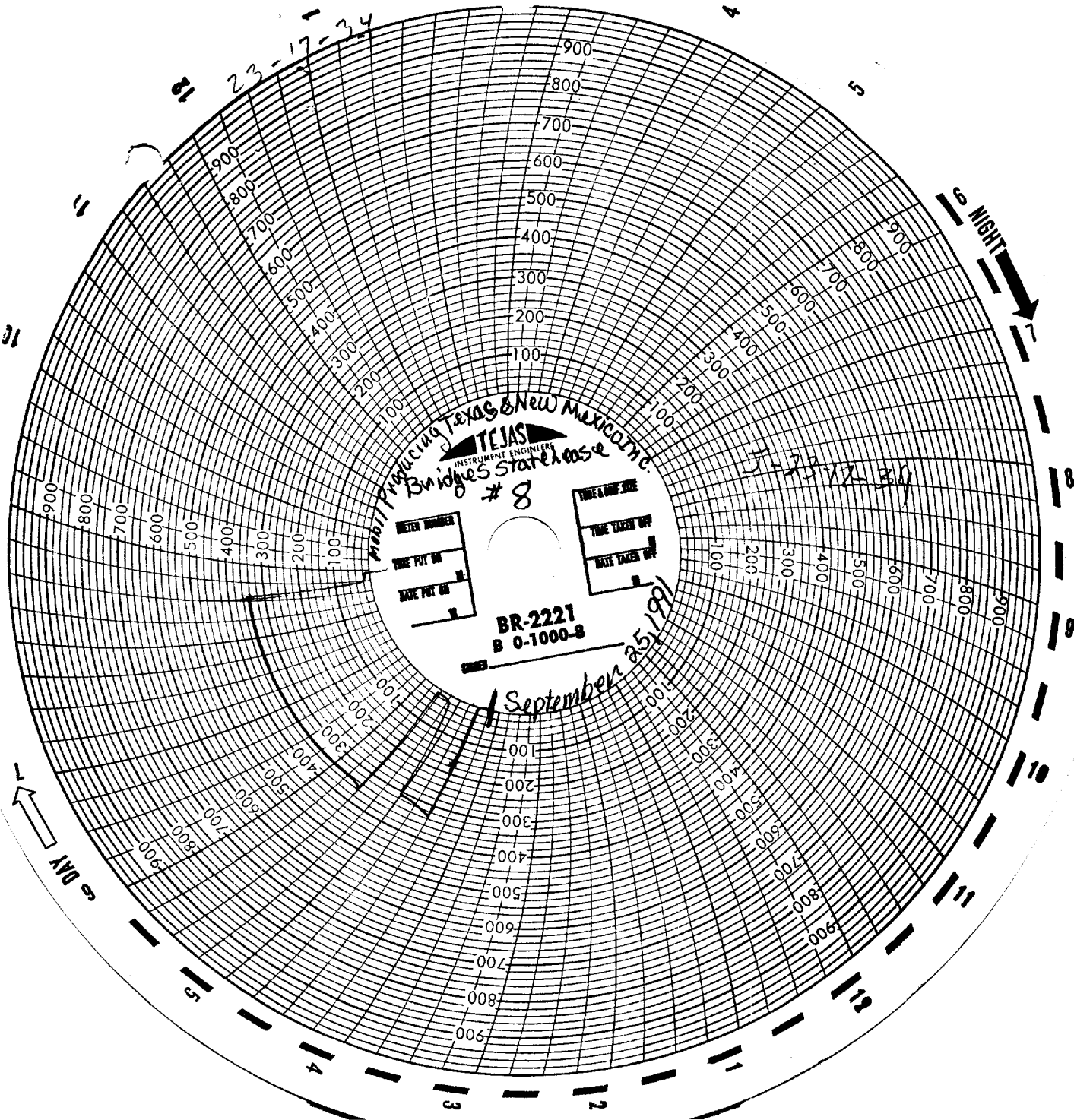
APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

This Approval of Temporary
Abandonment Expires

10-1-96

OCT 23 1991



EXHIBITION

1001 10 100