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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <small>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR MOVE BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - I" (FORM C-101) FOR SUCH PROPOSALS.)</small>		
OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name
Name of Operator Mobil Oil Corporation		8. Farm or Lease Name Bridges State
Address of Operator Box 633, Midland, Texas 79701		9. Well No. 10
Location of Well		10. Field and Pool, or Wildcat Vac-Grayburg-S.A.
UNIT LETTER <u>F</u> , <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>23</u> TOWNSHIP <u>17-1</u> RANGE <u>34-E</u> NMPM.		
15. Elevation (Show whether DF, RT, GR, etc.) <u>4040 CR</u>		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
FORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
WELL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/>

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.

• Installed identified risers and surface valves on outlet of all unexposed casing strings.

• Installation was inspected and approved by NMOOC personnel

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

Original Signed by:

(Mrs.) Christine D. Tucker

TITLE Authorized Agent

DATE 5-25-76

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY