

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.	30-025-02078
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.	21N
9. Pool name or Wildcat	Vacuum Grayburg San Andres

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER WIW <input type="checkbox"/>	
2. Name of Operator Mobil Producing TX & N.M. Inc.	
3. Address of Operator Box 633, Midland, TX 79702	
4. Well Location Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line Section 25 23 Township 17S Range 34E NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

4/24/91 - Pulled tubing & Packer and RIH with Bridge Plug & Set @ 4026'.  
Run Tbg BIH, Circ Pkr fluid, pressure up casing to 500# for 30 minutes  
and TA WELL.

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

SIGNATURE Judy Dixon TITLE Engineering Technician DATE 5/20/91  
TYPE OR PRINT NAME Judy Dixon TELEPHONE NO. 688-2452

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR TITLE  DATE MAY 24 1991

CONDITIONS OF APPROVAL, IF ANY:

This Approval of Temporary  
Abandonment Expires 5-24-96

