Submit 3 Copies

## State of New Mexico

(915) TELEPHONE NO. 688-2584

DATE .

APR 21 1993

to Appropriate District Office	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240			WELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			30-025-02084 5. Indicate Type of Lease
DISTRICT III			STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. B-1520
( DO NOT USE THIS FORM FOR PRO DIFFERENT RESERVITION (FORM C	ICES AND REPORTS ON WELLS OPOSALS TO DRILL OR TO DEEPEN OR RYOIR. USE "APPLICATION FOR PERMIT -101) FOR SUCH PROPOSALS.)	PLUG BACK TO A	7. Lease Name or Unit Agreement Name BRIDGES STATE
1. Type of Well: OR. GAS WELL X WELL	OTHER		
Name of Operator     Mobil Producing Tx. & N.M.	Inc *		8. Well No.
3. Address of Operator *Mobil Exploration & Producing U.S. Inc., as Agent for			57 9. Pool name or Wildcat
Mobil Producing TX. & N.M.	Inc., P. O. Box 633, Midland, T	X 79702	
4. Well Location			VACUUM GRAYBURG SAN ANDRES
Unit Letter D: 6	60 Feet From The NORTH	_ Line and	660 Feet From The WEST Line
Section 23	Township 17S Range	245	Nm. 15.
	10. Elevation (Show whether DF, I	CKB, RT, GR, etc.)	NMPM LEA County
'/////////////////////////////////////	Ammonista Day V		
11. Check	Appropriate Box to Indicate Natu		
NOTICE OF INT	ENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON RE	MEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON X	CHANGE PLANS CO	MMENCE DRILLING	OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CA	SING TEST AND CE	MENT JOB
OTHER:	🔲 от	HER: Press	un test Ju TA
12. Describe Proposed or Completed Operat	ions (Clearly state all pertinent details, and give		<u> </u>
work) SEE RULE 1103.			,, ,, ,,
THIS WELL WAS SHUT IN ON 19 A PRESSURE TEST WAS CONDU	0-27-87. MPTM IS REQUESTING E CTED ON 03-25-93. THE CHART (	XTENTION OF TA	A'D STATUS.
		thic Anama	al of Temporary
		Riandonment	Expires 5-1-9
I hereby certify that the information above is true	and complete to the best of my knowledge and belief.		
KAIN HOLLO	a <del>X</del>	NV. & REG. TECH	HNICIAN
SIGNATURE / CASE / CONTROL OF CON	TITLE		DATE 04-19-93

2 gm il dis

APPROVED BY -

TYPE OR PRINT NAME KAYE POLLOCK

CONDITIONS OF APPROVAL, IP ANY:

(This space for State Use)
ORIGINAL SIGNING BY JERRY STATION

SISTINCY I SUPERVISOR



