Submit 3 Copies to Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources Department				Form C-103 Revised March 25, 1999
DISTRICT I 1625 N. French Dr., Hobbs, NM 88240 OIL CONSERVATION DIVISION DISTRICT II				WELL API NO. 30-025-02093	Revised March 25, 1999
811 South First, Artesia NM 88210 P.O. BOX 2088 DISTRICT III Santa Fe, New Mexico 87504-2088				5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 DISTRICT IV 2040 South Pacheco, Sante Fe, NM 87505				ST 6. State Oil & Gas Lease	
				8015	
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)				7. Lease Name or Unit Agreement Name Bridges State	
1. Type of Well: Gas Oil Well Well Well					
2. Name of Operator Mobil Producing TX & NM, Inc.				8. Well No. 47	
3. Address of Operator P. O. Box 4358 Houston TX 7721			10-4358	9. Pool name or Wildcat Vacuum; Grayburg-San Andres	
4. Well Location Unit Letter	: 1980 Feet From	n The South	Line and 1980	Feet From The West	Line
Section 24	Township	, 17S	Range 34E	NMPH	Lea County
	10. 1	Elevation (Show whethe	r DR, RKB, RT, GR, etc.)		
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK \Box PLUG AND ABANDON \Box RE			REMEDIAL WORK	🗆 ALTI	ERING CASING \Box
TEMPORARILY ABAND	OON CHANGE P	LANS 🗆	COMMENCE DRILL	ING OPNS. 🛛 PLUG	G & ABANDONMENT 🗆
PULL OR ALTER CASIN	IG D MULTIPLE COMPLETIC	П	CASING TEST AND	CEMENT JOB \square	
OTHER: backflow test		⊠	OTHER:		
 12. Describe proposed or comp work) SEE RULE 1103. Proposed procedure for HOOK-UP: Close tubing and inject Bleed ALL pressure for Install pressure gauge 	backflowing: ction line valves rom piping , bleeder valve and cho		and give permittin dates, ind of proposed completion or	recompletion)	g any proposed
Connect valve to chok DAILY OPERATION: 7 Open well valve with Open choke slowly un Flow well to tank for Note tubing pressure a Repeat process for 7 d	7:00 AM to 2:00 PM Choke closed and NOT til pressure is stable at the seven daylight hou and tank level when sh	half of initial tu rs utting in well at 1	bing pressure night		and And St., St.,
I hereby certify that the information above	is true and complete to the best of my	-	Sr. Regulatory Specia	list	06/24/2002
SIGNATURE DOLORES	O. Howard	TITLE <u>*</u>	Sr. Acquiatory Specie	List DATE_06/24/2002 TELEPHONE NO. (713) 431-1792	
(This space for State Use)			ORIGINIAL	NONED BY	
APPROVED BY		TI T LE		A ENGINEER	DATE 2 7 2002

CONDITIONS OF APPROVAL IF ANY: