

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
B-1520

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE APPLICATION FOR PERMIT - "A" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☐	GAS WELL ☐	OTHER - <u>WU</u>	7. Unit Agreement Name
Name of Operator <u>MOBILE PRODUCING TX & A.M., Inc.</u>			8. Farm or Lease Name <u>SANTA FE</u>
Address of Operator <u>NINE GREENWAY PLAZA, SUITE 2700, HOUSTON, TX 77046</u>			9. Well No. <u>10</u>
Location of Well UNIT LETTER <u>C</u> . <u>1980</u> FEET FROM THE <u>WEST</u> LINE AND <u>660</u> FEET FROM THE <u>NORTH</u> LINE, SECTION <u>24</u> TOWNSHIP <u>17S</u> RANGE <u>34E</u> N.M.P.M.			10. Field and Pool, or Wildcat <u>VACUUM GRABBER SAN ANTONIO</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>4029 G.L.</u>			12. County <u>LEA</u>

6. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER <u>FWD AND REPAIR CASING LEAK</u> ☒	CASING TEST AND CEMENT JOB ☐	OTHER ☐

7. 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.

1. MIRR PU. FLOW BACK UNTIL WELL DIES.
2. NO INJECTION HEAD. NO AND TEST BOP.
3. RELEASE 7" TENSION PKR @ 1143'; POH + STACK 2-3/8" CL Tbg.
4. RIH w/ 7" 23" RBP + 7" TREATING PKR ON 2-3/8" WS. SET RBP @ 1145'.
5. TEST 7" CSG w/ TREATING PKR. SQZ LEAK(S) AND DRILL OUT AS NECESSARY. IF LEAK IS ABOVE 1490', ATTEMPT TO CIRCULATE TO SURFACE. DRILL OUT.
6. PU + TEST 7" CSG TO 900 PSI MAX. REPEAT STEP 4, IF NECESSARY.
7. RETRIEVE RBP. POH. RETURN TO INJECTION UPON APPROVAL FROM NMDCR.

PROPOSED STARTING DATE: MAY 16, 1986

THE COMMISSIONER MUST BE NOTIFIED
24 HOURS PRIOR TO COMMENCING WORK

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

SIGNED [Signature] TITLE ENGINEER DATE 5-6-86

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE MAY 7 1986

CONDITIONS OF APPROVAL, IF ANY: