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NEW MEXICO OIL CONSERVATION COMMISSION
HOBBS, NEW MEXICO

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

MAR 3 11 22 AM '65

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.

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.)

1. CIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name
2. Name of Operator Socony Mobil Oil Company, Inc.	8. Form of Lease Name State Bridges State
3. Address of Operator Box 1800, Hobbs, New Mexico	9. Well No. 13
4. Location of Well UNIT LETTER E 660 FEET FROM THE West LINE AND 1980 FEET FROM THE North LINE, SECTION 25 TOWNSHIP 17S RANGE 34E NMPM.	10. Field and Pool, or Wildcat Vacuum Blinbry
15. Elevation (Show whether DF, RT, GR, etc.) 4019 GR	12. County Lea

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 ☐	REMEDIATION WORK ☒	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPER.	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1133.

TD 6830' - FSTD 6750' - Blinbry Perfs. 6400-6544'

Dialog ran sinker bar, stopped at 6101'. Champion Cem. Co. pumped in 35 BLO. TP 1800-1800#. Treat Blinbry perfs. w/50 bbls. lease crude 1% Black Buster, 750/gals 5% HC 1 acid + 55/gals Champion Gypton SF-D, flushed w/20 bbls load oil + 10 gals/1000 gals Champion 71. Rate 2 BPM. Completed 1:30 PM, 2-18-65. Well shut-in. Swab and flowed 105 BLO + 3 BNO + 18 BAW in 20 hours on 16/64" choke. TP 425#.

On NMCCC Potential test - flowed 107 BNO + 9 BSW in 24 hours On 16/64" choke, TP 475#, GCR 1512/1, Gty. 36.9 @ 60°. Production before workover 0. Scaled up.

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

SIGNED [Signature] TITLE Group Supervisor DATE 3-2-65

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: