

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. NA
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. 5N
9. Pool name or Wildcat Vacuum Grayburg San Andres

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. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER INj. <input type="checkbox"/>	
2. Name of Operator Mobil Producing Tx. & N.M. Inc.	
3. Address of Operator c/o Mobil Exploration & Producing U.S. Inc. P. O. Box 633, Midland, Texas 79702	
4. Well Location Unit Letter C : 660 Feet From The North Line and 1980 Feet From The West Line Section 26 Township 17S Range 34E NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) NA	

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

Pull tubing and packer. RIH w/7" Bridge Plug, Set @ 40828'. Cap w/35' cmt. RIH with tubing & circulate packer. Pressure test gas to 300#. Will TA Well.

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PROPOSED OPERATIONS FOR THE C-103 TO BE APPROVED.

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

SIGNATURE Judy Dixon TITLE Environmental and Regulatory DATE 12/4/91
TYPE OR PRINT NAME Judy Dixon Envr/Reg/Technician (915) TELEPHONE NO. 688- 2452

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: