State of New Mexico

Submit 3 Copies to Approviate District Office	Energy, Minerals and Natural		Form C-103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexic	∞ 87504-2088	5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE N FEE 6. State Oil & Gas Lease No.
			B-1520
(DO NOT USE THIS FORM FOR PR DIFFERENT RESEI (FORM C	ICES AND REPORTS ON W OPOSALS TO DRILL OR TO DEEP RVOIR. USE "APPLICATION FOR 1-101) FOR SUCH PROPOSALS.)	EN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name BRIDGES STATE
1. Type of Well: OR. GAS WELL X WELL			
2. Name of Operator	OTHER		8. Well No.
Mobil Producing Tx. & N.M			38
3. Address of Operator *Mobil Exp	ploration & Producing U.S.	Inc., as Agent for	9. Pool name or Wildcat
4. Well Location	. Inc., P. O. Box 633, Midla	and, TX 79702	VACUUM BLINEBRY
Unit Letter A : 6	60 Feet From The NORTH	Line and	660 Feet From The EAST Line
Section 26	Township 17S	Range 34E	NMPM LEA COUNTY
	10. Elevation (Show wheth	her DF, RKB, RT, GR, etc.)	NMPM LEA County
11. Check	///// NA		
NOTICE OF INT	Appropriate Box to Indicate ITENTION TO:		eport, or Other Data SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON X	- i	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	3 OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CE	
OTHER:		OTHER:	
12. Describe Proposed or Completed Operational SEE RULE 1103.	tions (Clearly state all pertinent details,	and give pertinent dates, inclu	ding estimated date of starting any proposed
TBG & WOC 8 HRS. RIH W/TBG 5. SPOT PLUG OF 32 SX CMT 1 6. SPOT PLUG OF 37 SX CMT 8 7. SPOT 10 SX 24 FT TO SURF	NU BOP. MI WS. LBORE W/BRINE. PU WS TO DF 17 SX CMT 4140-3975 A PLUG OF 28 SX CMT 2700- TO TAG PLUG @ 2600. PU 1600-1500. DISP TBG/W BF B75-775. DISP TBG W/BRINI ACE. POH W/WS. WOC. MA FT BELOW GD. I FVFI WFI	O 4140. ACROSS TOL @ 4025. I 2600. STUB PLUG FOR TBG TO 1600. RINE. PU TBG TO 87. E. PU TBG TO 24. AKE SURE CMT IS @ TO	DISPL TBG W/BRINE. POH W/TBG. R CUT CSG. DISP TBG W/BRINE. PU
	· · · · · · · · · · · · · · · · · · ·		
I hereby certify that the information shows is true	and complete to the best of my building and		

Engineering Technician DATE 5/6/91 J. W. DIXON (915)TYPE OR PRINT NAME TELEPHONE NO. 688-2452 (This space for State Use); MAY II & 189

APPROVED BY-

THE COMMISSION MUST BE NOTIFIED 24 HOURS DIVING TO THE BEGINNING OF PLUC OF CHARMONS FOR THE G-103 TO BE MODELLY BUILDING.

- DATE -

CONDITIONS OF APPROVAL, IP ANY:

State of New Mexico Energy, erals and Natural Resources Department

Form C·103 Revised 1·1-89

DIS	IRIC	TI			
P.O.	Box	1980,	Hobbs,	NM	88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fo	, New	Mexico	87504-2088
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WELL API NO.	
5. Indicate Type of Lease STATE X	FEE [
4 0 4 0 1 4 0 V	

						STATE 🔼	FEE L
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. B-1520				
(DO NOT USE THE	SUNDRY NOTICES S FORM FOR PROPOSA IFFERENT RESERVOIR. (FORM C-101) F	LS TO DRILL OR TO DI	EEPEN (OR PER	OR PLUG BACK TO A	7. Lease Name or	Unit Agreement Nam	
1. Type of Well: OBL WELL X	GAS WELL	OTHER			Bridges :	State	
2. Name of Operator	WELL	OTALK .			8. Well No.	30000	
	ducing Texas &	New Mexico Inc			38		
	▼ c/o Mobil Exp			a U.S. Inc.	9. Pool name or		
P.O. Box	633, Midland	, Texas 79702			Vacuum-B	linebry	
4. Well Location Unit Letter	A : 660 F	eet From The North		Line and 660	Feet From	n The East	Line
Section 2	6т	ownship 17-S	Ra		nmpm Lea		County
		10. Elevation (Show	wheiher i	DF, RKB, RT, GR, etc.)			
<i>0////////////////////////////////////</i>	Check Appr	opriate Box to Ind	icate N	Nature of Notice, R	eport, or Othe	r Data	
	TICE OF INTENT	•				REPORT OF:	
PERFORM REMEDIA	AL WORK	PLUG AND ABANDON		REMEDIAL WORK		ALTERING CASIN	G 🗌
TEMPORARILY ABAI	NDON	CHANGE PLANS		COMMENCE DRILLING	GOPNS.	PLUG AND ABAN	DONMENT [
PULL OR ALTER CA	SING			CASING TEST AND CI	EMENT JOB		
OTHER:				отнея: Тетр	orarily Aba	ndon	X
12. Describe Proposed work) SEE RULE	or Completed Operations (6, 1103.	Clearly state all pertinent d	letails, an	nd give pertinent dates, inclu	ding estimated date	of starting any proposi	ed
08-28-89	MIRU Permian W POH w/rods, pu	Iell Service Imp and 209 joi	nts,	2-3/8 tubing.	Set CIBP @	6405'	
08-29-89	Pressure tester RD and release	d 500#/30 minu Permian Well	ites/l Serv	deld Ok. Pumpe	d (1) bbl/c	mt (60')	
09-04-89	MIRU Permian V	Well Service, l	ocate	ed casing leak	@ 4435-4466	•	
09-05-89	Set CIBP @ 440 RD and release	00' and capped Permian Well	w/35 Serv	cmt. Pressur ice. Well T.A.	e tested 30 'd.	O#/15 minute	s/Held Ok
I hereby certify that the SIGNATURE	information above is true and on the sand of the sand		viodge and	AS AGENT OF THE STATE OF T		DATE 10-4- (915) 688- TELEPHONE NO.	-89 -2585
	RIGINAL SIGNED BY	legav seves				OCT 1	0 1989
	DISTRICT I SUP	ERVISOR	170	T.E		DATE	

CONDITIONS OF AFFROVAL, IF ANY:

APPROVED BY --

TA experies 10-1-90