Submit 3 Copies to Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources Department			Form C-103 Revised 1-1-89
<u>DISTRICT 1</u> 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 Mexico 87504-2088		5. Indicate Type of	(Loase
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			STATE X FEE	
SUNDRY NOTICES AND REPORTS ON WELLS			B-1520	
(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: Ol. GAS WELL WELL	OTHER W	/IW		
2. Name of Operator  Mobil Producing Tx. & N.M	1 Inc *		8. Well No.	
3. Address of Operator *Mobil Exploration & Producing U.S. Inc., as Agent for			9. Pool name or Wildcat	
Mobil Producing TX. & N.M. Inc., P. O. Box 633, Midland, TX 79702			VACUUM GRAYBURG SAN ANDRES	
4. Well Location				
Unit Letter 0 : 6	60 Feet From The SOUTH	Line and	1980 Feet Prom	The EAST Line
Section 27	Township 17S Ra	nge 34E	NMPM LEA	County
	10. Elevation (Show whether	DF, RKB, RT, GR, etc.)		
	///// NA			<i>XIIIIIIIIII</i>
	Appropriate Box to Indicate 1		•	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	GOPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CE	EMENT JOB	
OTHER:		OTHER: TEMPORAR	ILY ABANDON V	VELL X
<ul> <li>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.</li> <li>9/25/91 - PULLED TUB/PKR &amp; RIH W/BRIDGE PLUG SET AT 4175.         PRESSURE TESTED CASING TO 300#/ 30 MIN WELL TEMPORARILY ABANDON     </li> </ul>				
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I hereby certify that the information above is just and complete to the tost of pro knowledge and belief.				
SIGNATURE Engineering Technician  DATE 10/3/91				
	THE THE THE			(915)
TYPE OR PEDITINAME J. W. DIXON				TELEPHONE NO. 688-2452

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(This space for State Use)

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY ---