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# NEW MEXICO OIL CONSERVATION COMMISSION

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

|                                                                        |
|------------------------------------------------------------------------|
| 5a. Indicate Type of Lease                                             |
| State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |
| 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 MOVE TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT TO DRILL" (FORM C-101) FOR PROPOSALS.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator  
Mobil Oil Corporation

3. Address of Operator  
Box 633, Midland, Texas 79701

4. Location of Well  
UNIT LETTER A, 660 FEET FROM THE N LINE AND 660 FEET FROM THE E LINE, SECTION 26 TOWNSHIP 17-S RANGE 35-E NMPM.

7. Unit Agreement Name

8. Farm or Lease Name  
State P

9. Well No.  
1

10. Field and Pool, or Wildcat  
Waco-Grandberry, SA

12. County  
Lea

15. Elevation (Show whether DF, RT, GR, etc.)  
3924 DF

16. 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"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>               | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>     | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOBS <input type="checkbox"/> | OTHER <input checked="" type="checkbox"/>     |

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 1103.

Installed identified risers and surface valves on outlet of all unexposed casing strings.

Installation was inspected and approved by NMOC personnel

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

SIGNED Original Signed by (Mrs.) Christine O. Tucker TITLE Authorized Agent DATE 5-26-76

APPROVED BY  TITLE  DATE

CONDITIONS OF APPROVAL, IF ANY,