State of New Mexico Energy, rais and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I			
PA Par 1000	Uabba	NTA #	00240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION
P.O. Box 2088 San

F.O. DUX 2000					
ıta	Fe,	New	Mexico	87504-2088	

WELL API NO.	
5. Indicate Type of Lease	

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

STATE FEE 6. State Oil & Gas Lease No.

	B-1520
SUNDRY NOTICES AND REPORTS ON WEI	LS ////////////////////////////////////
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN DIFFERENT RESERVOIR. USE "APPLICATION FOR PE (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil GAS WELL X WELL OTHER	Bridges State
2. Name of Operator	8. Well No.
Mobil Producing Texas & New Mexico Inc.	33
3. Address of Operator c/o Mobil Exploration & Produci	ng II S. Inc. 9. Pool name or Wildcat
Address of Operator c/o Mobil Exploration & Producing P.O. Box 633, Midland, Texas 79702	Vacuum Grayburg, S.A.
4. Well Location	Tucadiii di dybui g, S.A.
Unit Letter J: 1980 Feet From The South	Line and 1980 Feet From The East Line
Section 26 Township 17-S Ra	nage 34-E NMPM Lea County
10. Elevation (Show whether	DF, RKB, RT, GR, etc.)
11. Check Appropriate Box to Indicate 1	Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
ERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK ALTERING CASING
EMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
ULL OR ALTER CASING	CASING TEST AND CEMENT JOB
THER:	OTHER: Temporarily Abandon X
 Describe Proposed or Completed Operations (Clearly state all pertinent details, an work) SEE RULE 1103. 	d give pertinent dates, including estimated date of starting any proposed

08-28-89	MIRU X-Pert WS	POH w/rods and	pump. Set	%" CIB	P @	4400'	rapped	w/35'	cmt
08-29-89	Pressure tested	300#/15 minutes	s/Held Ok.	POH w	/152	joint	ts, 2-7/	8 tub	ing
	RD and release.	X-Pert WS. We	ell T.A.'d.						

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT 1 SUPERVISOR APPROVED BY CONDITIONS OF APPROVAL IS ANY.	TITLE _		OCT 1 0 1989
TYPEOR FRINT NAME Shirley Todd			(915) 688-2585 TELEPHONE NO.
I hereby certify that the information above is true and complete to the best of my knowledge SEGNATURE	re and belie	E. MOBIL EXTROCRATION A BROWN DIRECTOR TO. AS AGENT OUR MORE PRODUCING TX & VM INC.	DATE