

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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.

30225-21362

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-1520

7. Lease Name or Unit Agreement Name

BRIDGES STATE

8. Well No.

104

9. Pool name or Wildcat

VACUUM UPPER PENN

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 ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Mobil Producing Tx. & N.M. Inc.*

3. Address of Operator

*Mobil Exploration & Producing U.S. Inc., as Agent for

Mobil Producing TX. & N.M. Inc., P. O. Box 633, Midland, TX 79702

4. Well Location

Unit Letter B : 520 Feet From The NORTH Line and 2120 Feet From The EAST Line

Section 25

Township 17-S

Range 34-E

NMPM LEA

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

FULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

DUE TO FAILED PACKER LEAKAGE TEST ON THIS WELL, REMEDIAL WORK WILL BE DONE
TO REPAIR. A PLT RETEST WILL BE CONDUCTED UPON COMPLETION OF WORKOVER.

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

SIGNATURE

Kaye Pollock

TITLE

ENV. & REG. TECHNICIAN

DATE 11-16-93

(915)

TYPE OR PRINT NAME KAYE POLLOCK

TELEPHONE NO. 688-2584

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

APPROVED BY

TITLE

NOV 22 1993

DATE

CONDITIONS OF APPROVAL, IF ANY: