| NO. OF COPIES RECEIVED  | 4   | Form C-103                                     |
|---|---|--|
| DISTRIBUTION  | 4   | Supersedes Old<br>C-102 and C-103              |
| SANTA FE  | NEW MEXICO OIL CONSERVATION COMMISSION  | Effective 1-1-65                               |
| FILE  |   |  |
| U.S.G.S.  |   | 5a. Indicate Type of Lease                     |
| LAND OFFICE   |   | State K Fee                                    |
| OPERATOR  |   | 5, State Oil & Gas Lease No.<br>B-1520         |
| SUNDRY NOTICES AND REPORTS ON WELLS  (DO NOT USE THIS FORM FOR PROPOSALS TO OBILL). OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.) |   |  |
|   |   |  |
| OIL GAS WELL TO WELL  | OTHER-  | 7. Unit Agreement Name                         |
| 2. Name of Operator   |   | 8. Farm or Lease Name                          |
| Mobil Oil Corporation   |   |  |
| 3. Address of Operator  |   | Bridges State                                  |
| P.O. Box 633, Midland, Texas  |   |  |
| 4. Location of Well   | Addam, lexas  | 109  |
|   | 3000 17 1 (20   | Vaccidni Upper Penn,                           |
| UNIT LETTER N   | 1830 FEET FROM THE West LINE AND 610 FEET I   | FROM Wolfcamp, Glorieta                        |
|   | •   |  |
| THE South LINE, SECT  | TON 24 TOWNSHIP 17S RANGE 34E   | MPM. (   |
| mmmmm   |   |  |
|   | 15. Elevation (Show whether DF, RT, GR, etc.)   | 12. County                                     |
|   | 4016  | Lea  |
| Check   | Appropriate Box To Indicate Nature of Notice, Report or   | Other Data                                     |
|   |   | ENT REPORT OF:                                 |
|   |   |  |
| PERFORM REMEDIAL WORK   | PLUG AND ABANDON REMEDIAL WORK  | . ALTERING CASING                              |
| TEMPORARILY ABANDON   | COMMENCE DRILLING OPNS.   |  |
| PULL OR ALTER CASING  |   | PLUG AND ABANDONMENT                           |
| THE ON ACTEN CASING   |   | <u></u>  |
|   | OTHER   | L_   |
| OTHER   |   |  |
| 17. Describe Proposed or Completed (  | Operations (Clearly state all pertinent details, and give pertinent dates, inclu  | ding assigned data of stanting and assign      |
| Bridges State Wel   | 1 # 109 This well is a Triple at this time  |  |
| Perforate Additio 9583,87,89, 9668,   | off & Abd. Vacuum Glorieta Zone. nal Perforations in Vacuum Wolfcamp Zone (9532 70, 9710, 9818,20,34,40,42,65,82,91,96, 9918, | 2,40,43,45,61,70,73,76,<br>58, 61,69,80,87,93) |
| 1-JSPF  |   |  |
|   |   |  |
| Complete in Vacuu   | m North Abo Zone (8427-8466) - New Zone   |  |
|   |   |  |
|   |   |  |
|   |   |  |
|   |   |  |
|   |   |  |
|   |   |  |
|   | •   |  |
|   |   |  |
|   |   |  |
| •   |   |  |
| IR I hereby cartify that the informal   | on above is take and complete to the best of my knowledge and belief.   | <del></del>                                    |
| to, a nereoy certify that the informatik  | on spove is true and complete to the best of my knowledge and belief.   |  |
| \ \ hac ///   | e ' V   |  |
| SIGNED  | me Authorized Agent   | DATE 11-27-67                                  |
|   |   |  |
| $H = H \cdot H$   | X A-  |  |
|   | Wilmer .  |  |
| APPROVED BY   | THE TITLE   | DATE   |
| CONDITIONS OF APPROVAL, IF AN   | Y1 / /  |  |