NO. OF COPIES RECEIVED			Form C-103
DISTRIBUTION	,	Q. Q.	Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONS	SERVATION COMMISSION	Effective 1-1-65
FILE	ery e aveda		5a. Indicate Type of Lease
U.S.G.S.		Company of the second	State X Fee
OPERATOR			5. State Oil & Gas Lease No.
		·	B-1520
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM POPOSALS TO DRILL ON TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPRICATION FOR PERMIT - " FORM C-101 FOR BUCK PROPOSALS.)			
1. OIL X GAS WELL	7. Unit Agreement Name		
2. Name of Operator Mobil Oil Corporation			8. Form or Lease Name Bridges State
3. Address of Operator P. O. Box 633, Midland, Texas 79701			9. Well No. 117
4. Location of Well	660 Sout	Vac. Upper Penn. Vac. Wolfcamp, Vac. Glorieta	
East	23 17		
THE LINE, SECTION TOWNSHIP RANGE NMPM			
15. Elevation (Show whether DF, RT, GR, etc.) 4030 GL			12. County Lea
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN	ITENTION TO:	SUBSEQUEN	T REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
	[OTHER	
OTHER	——————————————————————————————————————		
17. Describe Proposed or Completed Opwork) SEE RULE 1603.	erations (Clearly state all pertinent det	ails, and give pertinent dates, includin	g estimated date of starting any proposed
September 11, 1966 - Ran 123 Joints - 5689' of 7" OD 23# S95 ST & C Liner on BOT Hanger. Set at 10,414 w/Top of Liner @ 4710'. Halliburton cemented w/1375 sax Cement, 1275 sax 4% Gel, 100 Sax Incore Neat. Job complete @ 6:00 P.M. 9-11-1966. Cement circulated. Tested top of 7" Liner w/2000#, 30 Min. OK. Total WOC 24 hours.			
$\frac{\mathbf{d}}{dt} = \frac{\mathbf{d}}{dt} = $			
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18. I hereby certify that the information	aboye is true and complete to the best of	f my knowledge and belief.	
SIGNED TO A. Pavne	if he TITLE	uthorized Agent	Sept. 19, 1966
The rayle			
APPROVED BY	MILE TITLE		DATE
CONDITIONS OF APPROVAL, IF ANY			
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