Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

200000	_ 6,7		-		Revised March 25, 1999
	M 88240 OIL CONSERVATION DIVISION			WELL API NO. 30-025-22630	
DISTRICT II 811 South First, Artesia NM 88210	with First Artesia NM 88210				
DISTRICT III Santā Fe, New Mexico 8/504-2088 1000 Rio Brazos Rd., Aztec, NM 87410				5. Indicate Type of	STATE FEE
DISTRICT IV 2040 South Pacheco, Sante Fe, NM 87505				6. State Oil & Gas <b>B-1520</b>	Lease No.
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)				7. Lease Name or Bridges State	Unit Agreement Name
1. Type of Well: Oil Well	Gas Well Other	Gas Well Other injector			
2. Name of Operator  Mobil Producing TX & NM, Inc.				8. Well No. 127	
3. Address of Operator P. O. Box 4358				9. Pool name or Wildcat	
Houston		X 7721	0-4358	Vacuum; Grayl	ourg-San Andres
4. Well Location Unit Letter M : 60	00 East From The South		Line and 560	Feet From Th	e west Line
J					_
Section 24	Township 17S //////10. Elevation (Sho		Range 34E DR, RKB, RT, GR, etc.)	NMPH	Lea County
	/////				<u> </u>
	Appropriate Box to InNTENTION TO:  PLUG AND ABANDON CHANGE PLANS	_		EQUENT REP	
PULL OR ALTER CASING	_		CASING TEST AND C	_	
OTHER: backflow test	COMPLETION	$\boxtimes$	OTHER:		
12. Describe proposed or completed oper work) SEE RULE 1103. (For Multi	rations. (Clearly state all pertiner	nt details, an	nd give pertinent dates, inclu	iding estimated date of	f starting any proposed
Proposed procedure for backflowing: HOOK-UP:  Close tubing and injection line valves Bleed ALL pressure from piping Install pressure gauge, bleeder valve and choke Connect valve to choke to piping to tank  DAILY OPERATION: 7:00 AM to 2:00 PM Open well valve with Choke closed and NOTE tubing pressure and note tank level Open choke slowly until pressure is stable at half of initial tubing pressure Flow well to tank for the seven daylight hours Note tubing pressure and tank level when shutting in well at night Repeat process for 7 days. Haul liquids to Bridges State Tank Battery as needed					
		<del></del>	Tank Battery as need		
I hereby certify that the information above is true and co	omplete to the best of my knowledge and be		r. Regulatory Special	ist	DATE 11/02/2001
TYPE OR PRINT NAME Dolores O. How	ward	TITLE			DNE NO. (713) 431-1792
(This space for State Use)					
Crim above for some cast				18.0 BY	Alta y
CONDITIONS OF APPROVAL IF ANY:		TITLE	PT % 100 0	NGINEER	- ANTE