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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-1520	

<p align="center">SUNDRY NOTICES AND REPORTS ON WELLS</p> <p align="center"><small>(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.)</small></p>		
<p>1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-</p>		7. Unit Agreement Name
<p>2. Name of Operator</p> <p>Mobil Oil Corporation</p>		8. Farm or Lease Name
<p>3. Address of Operator</p> <p>Box 633, Midland, Texas 79701</p>		9. Well No.
<p>4. Location of Well</p> <p>UNIT LETTER <u>A</u> <u>900</u> FEET FROM THE <u>North</u> LINE AND <u>990</u> FEET FROM <u>East</u> LINE, SECTION <u>25</u> TOWNSHIP <u>17-S</u> RANGE <u>34-E</u> N.M.P.M.</p>		10. Field and Pool, or Wildcat
<p>15. Elevation (Show whether DF, RT, GR, etc.)</p> <p>4018 Gr</p>		12. County
		Lea

<p align="center">Check Appropriate Box To Indicate Nature of Notice, Report or Other Data</p>			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

16. 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.

Temporarily abandon effective 11-1-74.

Hold for study to plug and abandon.

Expires 10/11/75

17. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u>H. J. McLaughlin</u>	TITLE <u>Authorized Agent</u>	DATE _____
APPROVED BY <u>Le D. Ragan</u>	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____		