		••				
NO. OF COLIES RECEIVED				Form C-103 Supersedes	014	
DISTRIBUTION					01a C-103	
SANTA FE	NI NI	EW MEXICO OIL CONS	ERVATION COMMISSION	Effective 1-	1-65	
FILE				[
U.S.G.S.				5a, Indicate Ty	يسا	
LAND OFFICE				5. State Oil 6	Fee	
OPERATOR	,			5. Sidle Off &	ads Lease No.	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OF TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)						
1.			71.07.03.423.7	7. Unit Agreem	ent Name	
OIL GAS WELL WELL	OTHER- V	IW				
2. Name of Operator					se Name	
Mobil Oil Corporation					North Vac abo Unit	
3. Address of Operator						
Box 633, Midland, Texas 79701						
4. Location of Well					Pool, or Wildcat	
UNIT LETTER F		T FROM THE West	LINE AND	FEET FROM North V	ac abo	
3T 1	0.2	17 0	0 / 77			
THE NOTER LI	NE, SECTION 23	TOWNSHIP 1/-S	RANGE 34-E	- MEM.		
	15.	Elevation (Show whether	DF, RT, GR, etc.)	12, County	~ ####	
			4030 GR	Lea		
16.	Check Appropriate	Box To Indicate N	ature of Notice, Repor			
	E OF INTENTION			EQUENT REPORT OF	₹:	
PERFORM REMEDIAL WORK		PLUG AND ABANDON	REMEDIAL WORK		ERING CASING	
TEMPORARILY ABANDON			COMMENCE DRILLING OPNS.		AND ABANDONMENT	
PULL OR ALTER CASING		CHANGE PLANS	CASING TEST AND CEMENT JOS		AND ABANDONMENT	
_		<u> </u>	OTHER			
OTHER				,		
17. Describe Proposed or Com	inleted Operations (Clea	rly state all pertipent dete	ails and nive pertinent dates	inaluding actionted data	f continue	
work) SEE RULE 1103.	ipreted Operations (Grea	i, state all pertitent act	itis, and give pertinent dates,	including estimated date of	j starting any proposed	
Popular look in O	5/011 assina br	outondina 711 1		. 1		
Run retrievable	bridge plug (7)	extending / I	iner to surface an imately 4500'. Ca	id cementing.		
			7"-23# tie back to			
			OT Combination co			
			culated volume = 6			
			6' extension for i			
			te to brine water			
sand and pull RBP run injection tubing & pressure test to 7000 psi						
circulate annulus to treated water - use Tretolite KW-37 or Cortron						
2207 before setti	ing.					
,						
	-					
18. I hereby certify that the in	1	and complete to the best o	f my knowledge and belief.		**************************************	
111. +	O. Sucker					
SIGNED Musline	U suker	TIFLE A	uthorized Agent	DATE	1-6-75	

TITLE ___

DATE ____