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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 ☒ Fee ☐
5. State Oil & Gas Lease No.

<p>SUNDRY NOTICES AND REPORTS OF WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)</p>		
<p>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/></p>		7. Unit Agreement Name
<p>Name of Operator Mobil Oil Corporation</p>		8. Farm or Lease Name North Vac Abo Unit
<p>Address of Operator Box 633, Midland, Texas 79701</p>		9. Well No. 155
<p>Location of Well UNIT LETTER <u>D</u>, <u>560</u> FEET FROM THE <u>N</u> LINE AND <u>520</u> FEET FROM THE <u>W</u> LINE, SECTION <u>23</u> TOWNSHIP <u>17-N</u> RANGE <u>34-E</u> NMPM.</p>		10. Field and Pool, or Wildcat North Vac - Abo
<p>15. Elevation (Show whether DF, RT, GR, etc.) 4032 GR</p>		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

<p>PERFORM REMEDIAL WORK <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>	<p>PLUG AND ABANDON <input type="checkbox"/></p> <p>CHANGE PLANS <input type="checkbox"/></p>	<p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOBS <input type="checkbox"/></p> <p>OTHER <input checked="" type="checkbox"/></p>	<p>ALTERING CASING <input type="checkbox"/></p> <p>PLUG AND ABANDONMENT <input type="checkbox"/></p>
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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.

Installed identified risers and surface valves on outlet of all unexposed casing strings

Installation was inspected and approved by NMOOC personnel

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

<p>Original Signed by: (Mrs.) Christine O. Tucker</p>	<p>TITLE Authorized Agent</p>	<p>DATE 5-25-76</p>
<p>Original Signed by: John R. Ryan</p>	<p>TITLE</p>	<p>DATE</p>
<p>PROVED BY</p>	<p>TITLE</p>	<p>DATE</p>
<p>CONDITIONS OF APPROVAL, IF ANY:</p>		