

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Bridges State
8. Well No. 194
9. Pool name or Wildcat Vacuum Grayburg/San Andres

**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.)

1. Type of Well:

OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator

Mobil Producing Tx. & N.M. Inc.

3. Address of Operator c/o Mobil Exploration & Producing U.S. Inc.  
P. O. Box 633, Midland, Texas 79702

4. Well Location

Unit Letter DC : 1427 <sup>1252</sup> Feet From The North Line and 2554 <sup>1417</sup> Feet From The East west Line

Section 23

Township 17S

Range 34E

NMPM

Lea

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

KB: 4043' (13' AGL)

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  
**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

Return to Production

OTHER: ☒

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. 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.

1. MIRU workover unit. NU BOP. Test
2. Drill out CIBP @ 4500' + 35' cement. Circulate hole clean.
3. RIH w/used 2-7/8" Duolined tubing + Model "R" production packer. Set packer @  $\pm$  4550'.
4. Pump 3000 gal 15% D1 NEFE HCL.
5. Swab well if needed. POP.

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

SIGNATURE M. E. Sweeney Manager Environmental and Regulatory DATE 4/26/89

TYPE OR PRINT NAME M. E. Sweeney

(915)  
TELEPHONE NO. 688- 2452

(This space for State Use)

**Eddie W. Seay**  
**Oil & Gas Inspector**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE **MAY 1 1989**

CONDITIONS OF APPROVAL, IF ANY: