

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-103
Revised 10-1-75

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.B.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
B-1520-1

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.)

OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator	North Vacuum Abo Unit
Mobil Producing TX & NM Inc.	8. Farm or Lease Name
Address of Operator	9. Well No.
9 Greenway Plaza - Suite 2700 - Houston, TX 77046	278
Location of Well	10. Field and Pool, or Wellcat
UNIT LETTER M 650 West 500	North Vacuum Abo
FEET FROM THE LINE AND FEET FROM	
THE South LINE, SECTION 23 TOWNSHIP 17S RANGE 34E NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
4029	Lea

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

FORM REMEDIAL WORK	<input type="checkbox"/>	PLUG AND ABANDON	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
ALTER OR ALTER CASING	<input type="checkbox"/>	OTHER	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
COMMENCE DRILLING OPER.	<input type="checkbox"/>	PLUG AND ABANDONMENT	<input type="checkbox"/>
CASING TEST AND CEMENT JOB	<input checked="" type="checkbox"/>		
OTHER	<input type="checkbox"/>		

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1502.

7-3/7-85 Drlg 12-1/4" hole.

7-8-85 TD 12-1/4 hole, RIH w/1 jt 32# & 113 jts 28# 8-5/8 S80 ST&C w/4 cent1.

7-9-85 Cmt csg @ 5000' w/2370sx Cl C Neat + 600sx Cl C, circ, hole WO 41%, test to 1000#/30 min/ok, WOC 18 hrs.

7-10/14-85 Drlg new form.

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

Nancy Lewis TITLE Authorized Agent DATE 7-17-85

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

DATE JUL 22 1985

CONDITIONS OF APPROVAL, IF ANY: