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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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 North Vacuum Abo Unit
Name of Operator Mobil Producing TX & NM Inc.		8. Farm or Lease Name
Address of Operator 9 Greenway Plaza, Suite 2700, Houston, TX 77046		9. Well No. 289
Location of Well UNIT LETTER G 1980 North 1980 FEET FROM THE LINE AND FEET FROM East LINE, SECTION 27 TOWNSHIP 17S RANGE 34E NMPM.		10. Field and Pool, or Wildcat North Vacuum Abo
15. Elevation (Show whether DF, RT, GR, etc.) GL - 4042		12. County Lea

6. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

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 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 checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

12-6/14-85 Drlg.

12-15-85 TD 12-1/4" hole, RIH w/37 jts 32# & 76 jts 28# '8-5/8" S-80 ST&C w/5 centl, cmt on btm @ 5000 w/2900x C Neat + 200x C C, circ 13lx, 40% HWO, capped foam cmt w/100x Thixotropic cmt, WOC.

12-16-85 WOC 18 hrs, PT csg 1000#/30 min/ok - drlg new form.

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

Signed <u>Nancy Lewis</u>	TITLE <u>Authorized Agent</u>	DATE <u>12-20-85</u>
ORIGINAL SIGNED BY JERRY SEXTON		
PROVED BY <u>DISTRICT 1 SUPERVISOR</u>	TITLE	DATE <u>DEC 26 1985</u>

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

DEC 23 1985

O.C.D.
HOBBS OFFICE