

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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. 30-025-32598
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 STATE M
8. Well No. 16
9. Pool name or Wildcat WILDCAT
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3931 GR

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 & NM INC.* *MOBIL EXPLORATION & PRODUCING

3. Address of Operator
AS AGENT FOR MPTM , BOX 633, MIDLAND, TX 79702

4. Well Location
Unit Letter **E** : **2075'** Feet From The **NORTH** Line and **330'** Feet From The **WEST** Line
Section **34** Township **17-S** Range **35-E** NMPM LEA County

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 ☐
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.

06-25-97 NOTIFIED LINDA W/OCD IN HOBBS, NM @ 3:30 FINISH PLUGGING WELL/JACK GRIFFIN W/OCD CAME TO LOCATION.
06-26-97 MIRU/RIG & EQUIP, NIP DN WELL INSTALL BOP, RIH, TAG CMT @ 1414, PO SPOT 35 SX PLUG OUT, TBG TO YARD, RD, SDFN.
06-27-97 MOVED OUT EQUIP, CUT WELL HEAD OFF, WELD ON PLATE W/MARKER BACK FILL CELLAR AND PIT CLEAN UP LOCATION, WELL IS P&A'D.

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

SIGNATURE Shirley Houchins TITLE ENV. & REG. TECHNICIAN DATE 08-05-97

TYPE OR PRINT NAME SHIRLEY HOUCHINS

TELEPHONE NO. 915-688-2585

(This space for State Use)

APPROVED BY Johnny Ralume TITLE STATE ENGINEER DATE 08-05-97
CONDITIONS OF APPROVAL, IF ANY:

JCI CW