NO. OF COPIES RECEIVED			Form C-103 Supersedes Old
DISTRIBUTION SANTA FE	NEW HEYICO OIL CONS	EDVATION COMMISSION	C-102 and C-103
FILE	NEW MEXICO OIL CONS	ERVATION COMMISSION	Effective 1-1-65
U.S.G.S.	•		5a. Indicate Type of Lease
LAND OFFICE		od	State Fee X
OPERATOR	j	CELL . • ?	5. State Oil & Gas Lease No.
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.)			
USC "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)			7. Unit Agreement Name
OIL GAS WELL WELL	OTHER-		7. Other Agreement Name
2. Name of Operator			8. Farm or Lease Name
Mobil Oil Corporation			E. O. Carson
3. Address of Operator			9. Well No.
Box 633, Midland, Texas			5
4. Location of Well UNIT LETTER G 660 / FEET FROM THE NORTH LINE AND FEET FROM			10. Field and Pool, or Wildcat Penrose-Skelly Gr-bg
			ow ALLIALIANIANIANIANIANIANIANIANIANIANIANIANIANI
THELINE, SECTI	33 - 21-	5 RANGE 37-E NMF	
	15. Elevation (Show whether	DF, RT, GR, etc.)	12. County
			Lea
Check	Appropriate Box To Indicate N	latuse of Notice, Report or C	Other Data
NOTICE OF IN	NTENTION TO:		NT REPORT OF:
E)		<u></u>	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
PULL OR ALTER CASING	CHANGE PLANS	COMMENCE DRILLING OFNS.	PLUG AND ABANDONMENT
POCE ON PETEN CASING	CHANGE PEANS	CASING TEST AND CEMENT JOB RAISE CASING.	head connections to
OTHER		other surface	X
			· · · · · · · · · · · · · · · · · · ·
work) SEE RULE 1103.	erations (Clearly state all pertinent deta	ills, and give pertinent dates, includi	ag estimated date of starting any proposed
		_	
Casinghead connec	ctions were raised to su	rface and tagged. Cell	lar was filled with dirt.
The ich was inspe	ected by N.M. OCC. Les C	lements	
1110 000 440 11151	seded by Warra 000. Bes 0.	remenus.	
• •			_
		•	
18. I hereby certify that the information	above is true and complete to the best o	of my knowledge and belief.	
V L Mr M a.	Au	thorized Agent	
SIGNED W	TITLE		
MM	1/1:	,	
APPROVED BY	What we		SEP 15 196 9

CONDITIONS OF APPROVAL, IF ANY: