

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. 30-025-10203 ✓
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name S. E. LONG
8. Well No. 3
9. Pool name or Wildcat WANTZ (ABO)
10. Elevation (Show whether DF, RKB, RT, GR, etc.) NA

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER
2. Name of Operator Mobil Producing Tx. & N.M. Inc.*
3. Address of Operator *Mobil Exploration & Producing U.S. Inc., as Agent for Mobil Producing TX. & N.M. Inc., P. O. Box 633, Midland, TX 79702
4. Well Location Unit Letter O : 660 Feet From The SOUTH Line and 1980 Feet From The EAST Line Section 11 Township 22S Range 37E NMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) NA

11. 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"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
APORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: FRACTURE STIMULATE ABO FORMATION <input checked="" type="checkbox"/>

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.

10/14/91 - MIRU DOWELL. GEL TANKS. DIG FLOW BACK PIT. CHG OUT NIPPLES ON VALVES. CK BOP RAMS. RU KILL KILL TRK TO DS SUCTION. P 70 BBLs 2% KCL FOR RATE TEST. 1400 PSI @ 10 BPM. PERFORM QC TESTS. RU KILL TRK TO BS. LOAD BS & PRESS TO 1120 PSI. OK. START PAD. FM BROKE @ 1987 PSI 10 BPM W/26 BBL PUMPED. SCREEN OUT W/APPROX 10 BBL 8 PPG SD ON FM. SD PUMPS. RDMO DS & KILL TRUCK.

10/15/91 - FINISH CLEANING OUT.

10/16/91 - RIH/W/PROD EQUIP. WELLBORE CLEANED OUT TO PBTD 7160.

10/17/91 - ND BOP/RU PROD HEAD. HUNG WELL ON & PRESS TESTED OK. CLEANED UP, WAHED UP & COVERED WO PIT. RD & REL XPRT. TURNED WELL OVER TO PROD FOR TEST.

10/18/91 - NU PROD HEAD.

10/19/91 - SERV RIG RIH W/PUMP. HUNG WELL ON/LOADED TBG & TESTED OK.

10/21/91 - SERV RIG CHECKING FOR PUMP ACTION.

10/22/91 - PUMP TESTING.

10/23/91 - SERV RIG STACKED OUT RODS. REL TAC. CHECK PUMP. GOOD. CLEAN UP LOC. RD & REL XPRT WS #17.

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

SIGNATURE Judy Dixon TITLE Engineering Technician DATE 10/28/91
(915)
TYPE OR PRINT NAME J. W. DIXON TELEPHONE NO. 688-2452

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: