

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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SANTA FE	
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U.S.G.S.	
LAND OFFICE	
OPERATOR	

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 ☐ Fee ☒

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name Langlie Mattix Queen Uni
2. Name of Operator Mobil Producing TX & NM Inc.	8. Farm or Lease Name
3. Address of Operator 9 Greenway Plaza, Suite 2700, Houston, TX 77046	9. Well No. 1
4. Location of Well UNIT LETTER <u>L</u> , <u>1650</u> FEET FROM THE <u>South</u> LINE AND <u>330</u> FEET FROM THE <u>West</u> LINE, SECTION <u>11</u> TOWNSHIP <u>25-S</u> RANGE <u>37-E</u> NMPM.	10. Field and Pool, or Wildcat Langlie Mattix- 7 Rivers Queen
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER Temporary Abandonment ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. 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.

This well was shut in 3-18-86.

Request authority to retain well as temporarily abandoned.

RECEIVED BY / DATE 240 12-22-87

18. 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>12-16-86</u>
ORIGINAL SIGNED BY JERRY RANTON DISTRICT 1 SUPERVISOR		
APPROVED BY _____	TITLE _____	DATE <u>DEC 22 1986</u>
CONDITIONS OF APPROVAL, IF ANY:		