Drawer DD Artesia,

Form Approved. Budget Bureau No. 42-R1424

DISTRICT SUFERVISOR

Form 9-331 Dec. 1973

UNITED STATES	5. LEASE	
DEPARTMENT OF THE INTERIOR	NM-46275	
GEOLOGICAL PORTE CE	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
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 Form 9–331–C for such proposals.) OCT 14 1082	7. UNIT AGREEMENT NAME	
reservoir. Use Form 9–331–C for such proposals.) OCT 14 1982	8. FARM OR LEASE NAME	
1. oil gas well other OIL & GAS	Burton Flat Federal Comm. 9. WELL NO.	
2. NAME OF OPERATOR MINERALS MGMT. SERVICE	1	
Exxon Corporation ROSWELL, NEW MEXICO	10. FIELD OR WILDCAT NAME	
3. ADDRESS OF OPERATOR		
P. O. Box 1600, Midland, Texas 79702	11. SEC., T., R., M., OR BLK. AND SURVEY OR	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA	
below.)	Undesignated Burton Flat	
AT SURFACE: 1917' FNL & 660' FWL of Sec.	12. COUNTY OR PARISH 13. STATE	
AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	Eddy New Mexico	
	14. API NO.	
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,		
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:		
TEST WATER SHUT-OFF	(NOTE: Report results of multiple completion or zone change on Form 9–330.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Drawing of T/B attached. T/B located on well pad.

Above ground structures, not subject to applicable sately requirement shall be painted Spridstone Brown Fed. Std. 595- 20318 0130318

Subsurface Safety Valve: Manu. and Ty	/pe	Set @	Ft
18. I hereby certify that the foregoing	is true and correct		
SIGNED & A True	TITLEST. AdministratorATE	October 8, 1982	
APPROVED BY	(This space for Federal or State office use) TITLEDATE	APPROVED	
CONDITIONS OF APPROVAL, IF ANY:		007	1
	*See instructions on Payerse Side	7 JAMES A GULHAU	