

RECEIVED BY

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0136
Expires August 31, 1985

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

SINGLE
ZONE ☐

MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Exxon Corporation *ATTN: MELBA KNIPLING*

3. ADDRESS OF OPERATOR

Box 1600, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*
At surface

1650' FSL and 405' FWL of Sec. (NW SW)
At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

7.5 miles NE of Carlsbad

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any) 405'

16. NO. OF ACRES IN LEASE

80

17. NO. OF ACRES ASSIGNED
TO THIS WELL

40

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED, 882' SE to #2
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

5800'

20. ROTARY OR CABLE TOOLS

Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3202' GR

22. APPROX. DATE WORK WILL START*

3 quarter 1985

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17 1/2"	13 3/8"	48#/ft	800'	500 sx Circ. to Surf.
12 1/4"	8 5/8"	24#/ft	2500' 1600'	700 sx Circ. to surface
7 7/8"	5 1/2"	14# & 15.5#/ft	5800'	500 sx tie into intermediate csg.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

Edgar Runkel

TITLE

Unit Head

DATE

7-11-85

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

7-30-85

CONDITIONS OF APPROVAL, IF ANY:

APPROVAL SUBJECT TO
GENERAL REQUIREMENTS AND
SPECIAL STIPULATIONS

*See Instructions On Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Exxon Lse. No. _____ NEW MEXICO OIL CONSERVATION COMMISSION
State Lse. No. _____ WELL LOCATION AND ACREAGE DEDICATION PLAT
Federal Lse. No. _____ All distances must be from the outer boundaries of the Section.

Form C-102
Supersedes C-128
Effective 1-1-65

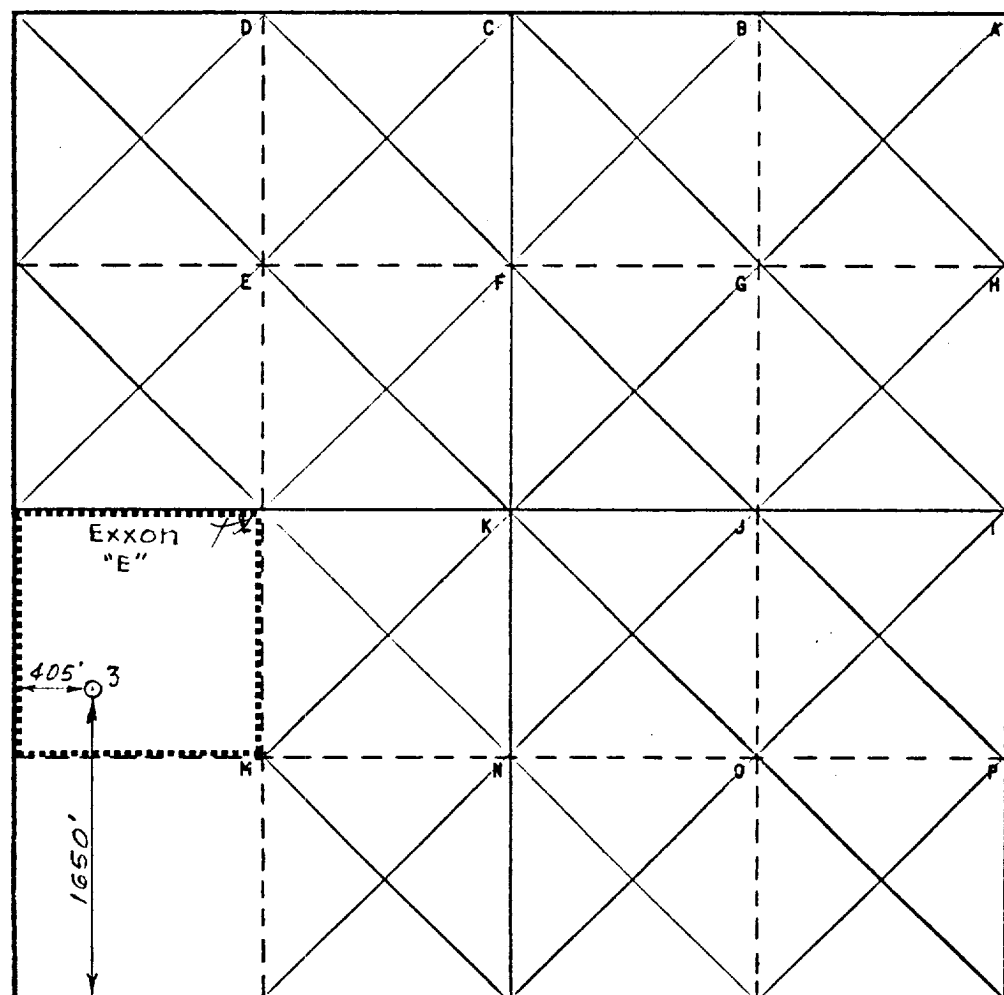
Operator Exxon Corporation		Lease BURTON FLAT "E" FEDERAL		Well No. 3
Unit Letter X7	Section 1	Township 21-S	Range 27-E	County EDDY
Actual Footage Location of Well: 1650 feet from the SOUTH line and 405 feet from the WEST line				
Ground Level Elev. 3202'	Producing Formation DELAWARE	Pool NORTHWEST FENTON	Dedicated Acreage: 40 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

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

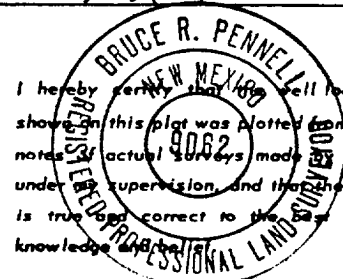
Name Edgar Pennell

Position UNIT HEAD

Company Exxon Corporation
Box 1600 Midland, Texas

Date 7-11-85

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge.



Date Surveyed 6-20-85

Registered Professional Engineer and/or Land Surveyor

Bruce R. Pennell

Certificate No. 9062

7.5 Miles NE of CARLSBAD, New Mexico

C.E. Sec. File No. W-A-8994

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL. DATE
(Other instructions on re-
verse side)
88210

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	RECEIVED BY JUL 31 1985 O. C. D. ARTESIA, OFFICE	5. LEASE DESIGNATION AND SERIAL NO. NM-4625
2. NAME OF OPERATOR Exxon Corporation Attn: Melba Knipling		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1600, Midland, Texas 79702		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1650' FSL and 405' FWL of Section		8. FARM OR LEASE NAME Burton Flat E Federal
		9. WELL NO. 3
		10. FIELD AND POOL, OR WILDCAT Undesig. Northwest Fenton-Delaware
		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec. 1-T21S-R27E
14. PERMIT NO.	15. ELEVATIONS (Show whether OF, RT, CR, etc.) 3202' GR GR	12. COUNTY OR PARISH Eddy
		13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) Amend 8 pt plan <input checked="" type="checkbox"/>		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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.) *

~~Please approve the following cement program for subject well.~~

Casing	Depth	Class C/Poz/Gel	Approx. Volume	Estimated Top of Cement
13 3/8"	800'	C	560 ft ³	Surface
8 5/8"	2500'	C/Poz/Gel	850 ft ³	Surface
		C	200 ft ³	1950'
5 1/2"	5800'	C	420 ft ³	3400'

18. I hereby certify that the foregoing is true and correct

SIGNED Melba Knipling TITLE Unit Head DATE 7-23-85

This space for Federal or State office use)

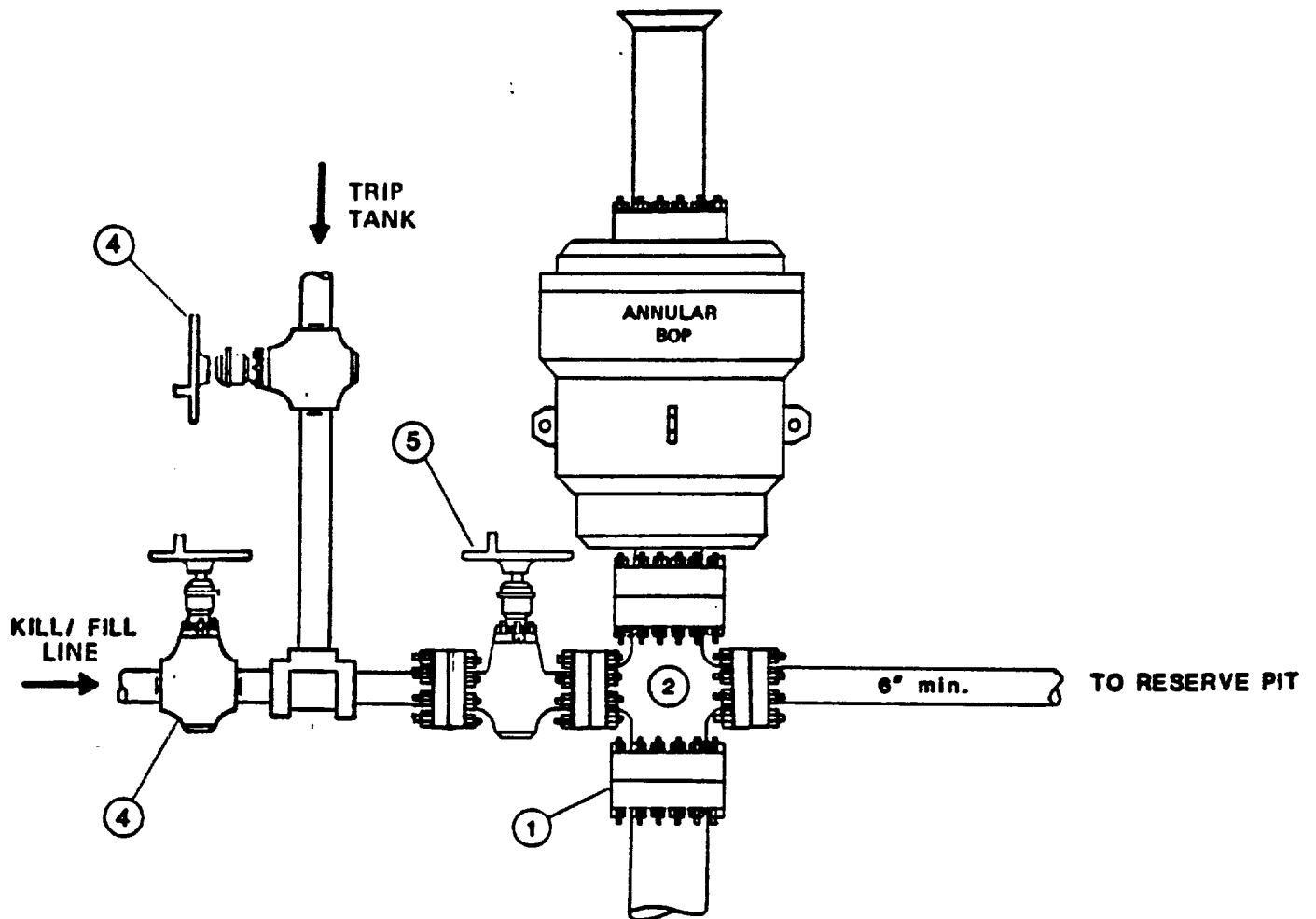
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

COMPONENT SPECIFICATIONS

Type SA Diverter

1. Wellhead or BOP Companion flange - screwed or welded to casing.
2. Flanged Drilling Spool.
3. Diverter line minimum size 6" internal diameter, steel pipe. Diverter lines must be securely anchored. Only flanged or welded connections can be used for pipe joint connections and 45° or 90° ells must not be installed on the end of diverter lines to direct flow downward.
4. Flanged or screwed gate or plug valve -- 2" minimum nominal diameter and 2000 psi minimum working pressure.
5. Full opening flanged gate or plug valve -- 2" minimum -- 2000 psi minimum working pressure.

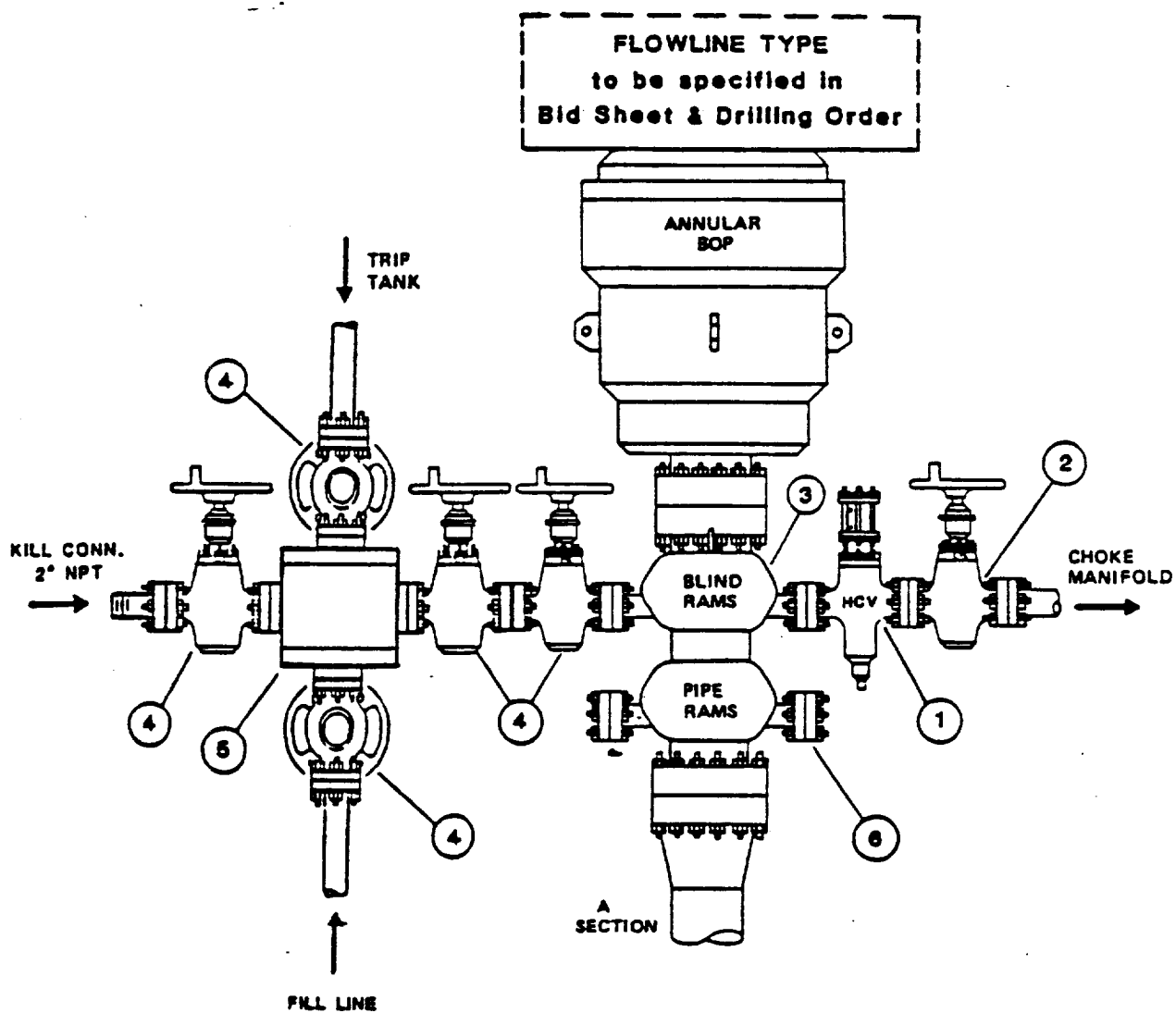
TYPE SA DIVERTER



1. Flanged hydraulically controlled gate valve -- 3" minimum nominal diameter -- same working pressure as BOP stack.
2. Flanged plug gate valve -- 3" minimum nominal diameter -- same working pressure as BOP stack.
3. BOP outlets must be 2" minimum nominal diameter for kill line and 3" minimum diameter for choke line.
4. Flanged plug or gate valve -- 2" minimum nominal diameter -- same working pressure as BOP stack.
5. Flanged cross or two (2) flanged tees.
6. Any BOP side outlet flange, located below the bottom ram, must be equipped with a blind flange.

NOTE: Each BOP stack must have separate side outlet connections for kill and choke lines, unless specific approval for a single side-outlet is obtained from the Exxon Division Drilling Manager prior to rig-up. Such approval will not be granted unless the equipment arrangement conforms to the specifications shown on pages 14 and 15 of this Section.

THREE PREVENT



COMPONENT SPECIFICATIONS

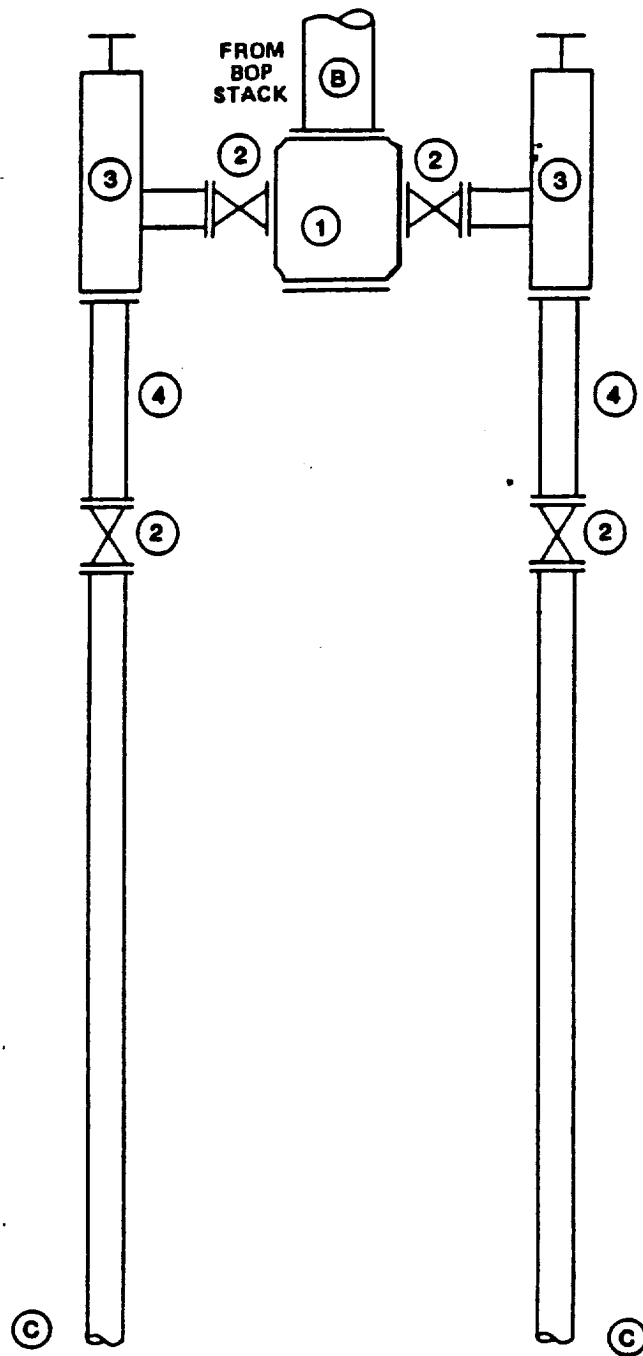
Type 2 CHOKE Manifold

1. Flanged or studded cross - 3" x 3" x 2" x 2" minimum nominal diameter with blind flange and equipped with needle valve pressure gauge.
2. Flanged plug or gate valve -- 2" minimum nominal diameter -- valve to have same working pressure rating as choke.
3. Flanged manually - adjustable choke equipped with tungsten carbide stems and seats and at least 3/4" orifice opening.
4. Flanged spacer spool - 2" minimum nominal diameter and approximately 18" length.

NOTE:

- A. The rated working pressure of the choke manifold will be specified in the Bid Letter and Drilling Order and all equipment must conform to the specifications in Table 1 of this Section.
- B. The choke line between the BOP stack and choke manifold should not contain any unnecessary bends or turns. Any required turns must be made with a running tee and a blind flange or welded bullplug. All connections must be either flanged or welded and all welding must be done by a certified welder.
- C. Both flare lines must be laid to the reserve pit or flare pit and must be securely anchored.

TYPE- 2 CHOKE MANIFOLD



TO RESERVE PIT
OR FLARE PIT

DRILLING PLAN
Burton Flat "E" Federal #3
Section 1, T-21-S, R-27-E
Eddy County, New Mexico

1. Estimated tops of important geological markers:

Delaware Mt. Grp.: 2,500'
Bone Spring : 5,000'

2. Estimated depths at which the top of anticipated water, oil, gas or other mineral-bearing formations are expected to be encountered and the plan for protecting such resources.

	<u>Depth</u>	<u>Protection</u>
Deepest FW:	500'	Casing & Cement
Oil-Bone Spring:	5,000'	Casing & Cement

3. Minimum specification for pressure control equipment:

- A. Wellhead Equipment: Thread type, 2000 psi WP for 13-3/8" x 8-5/8" x 5-1/2" casing program with 2-7/8" tubing hanger.
- B. Blowout Preventers: Refer to attached drawings and lists of equipment titles "Type RRA" and "Type SA Diverter" for description of BOP stacks and choke manifolds.
- C. BOP Control Unit: Unit will be hydraulically operated and have two control systems.
- D. Testing: Upon installation, the Type "SA Diverter" for the 13-3/8" surface casing will be tested to 100 psi. Similarly, the Type "RRA" BOP will be installed on the 8-5/8" intermediate casing and tested to a high pressure of 2000 psi and a low pressure (200-300 psi).

4. Supplementary drilling equipment information:

- A. Kelly Cocks: Upper and lower installed on kelly.
- B. Safety Valve: Full opening ball type to fit each type and size of drill pipe in use will be available on rig floor at all times. The valves will be in the open position for stabbing into drill pipe when kelly is not in the string.

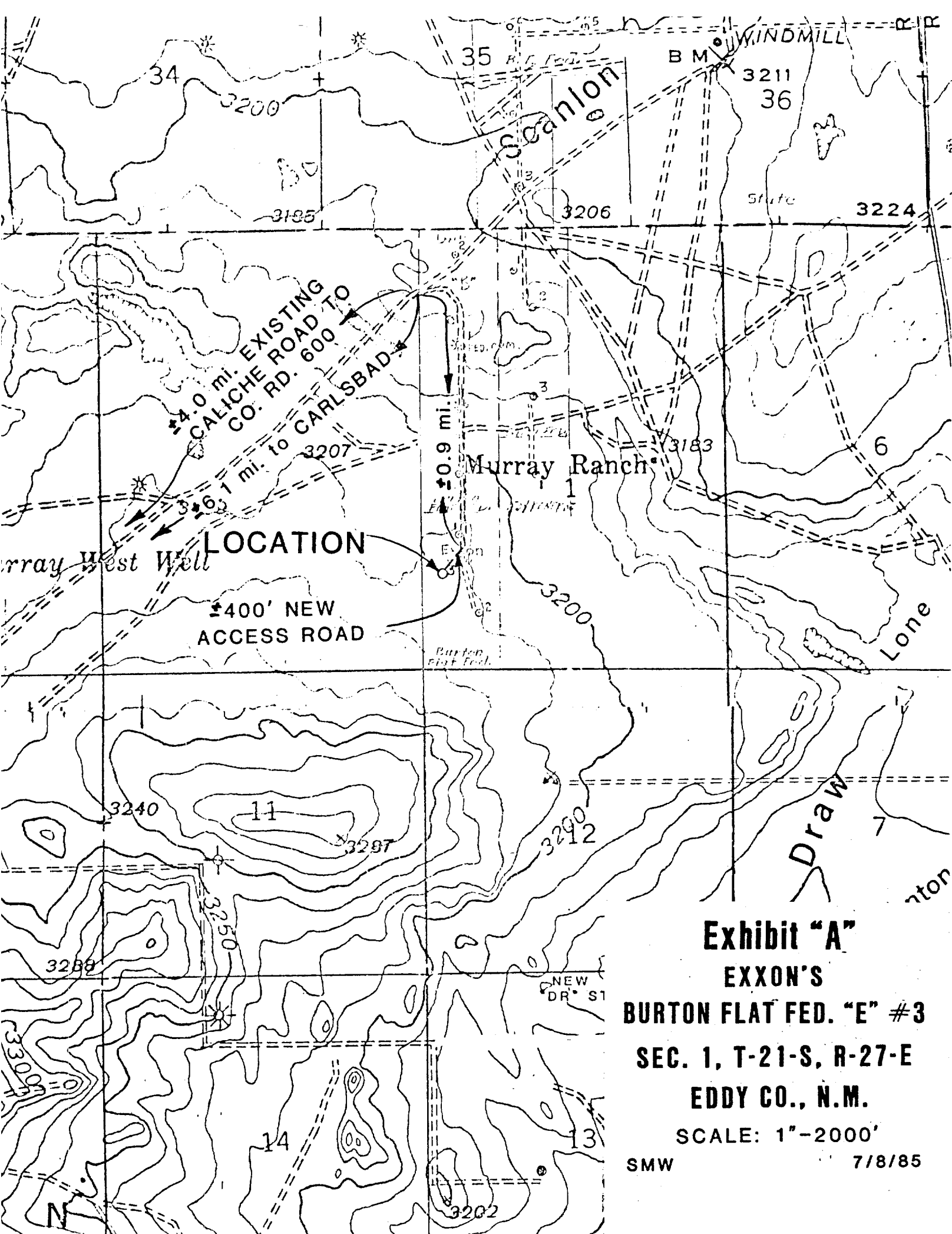
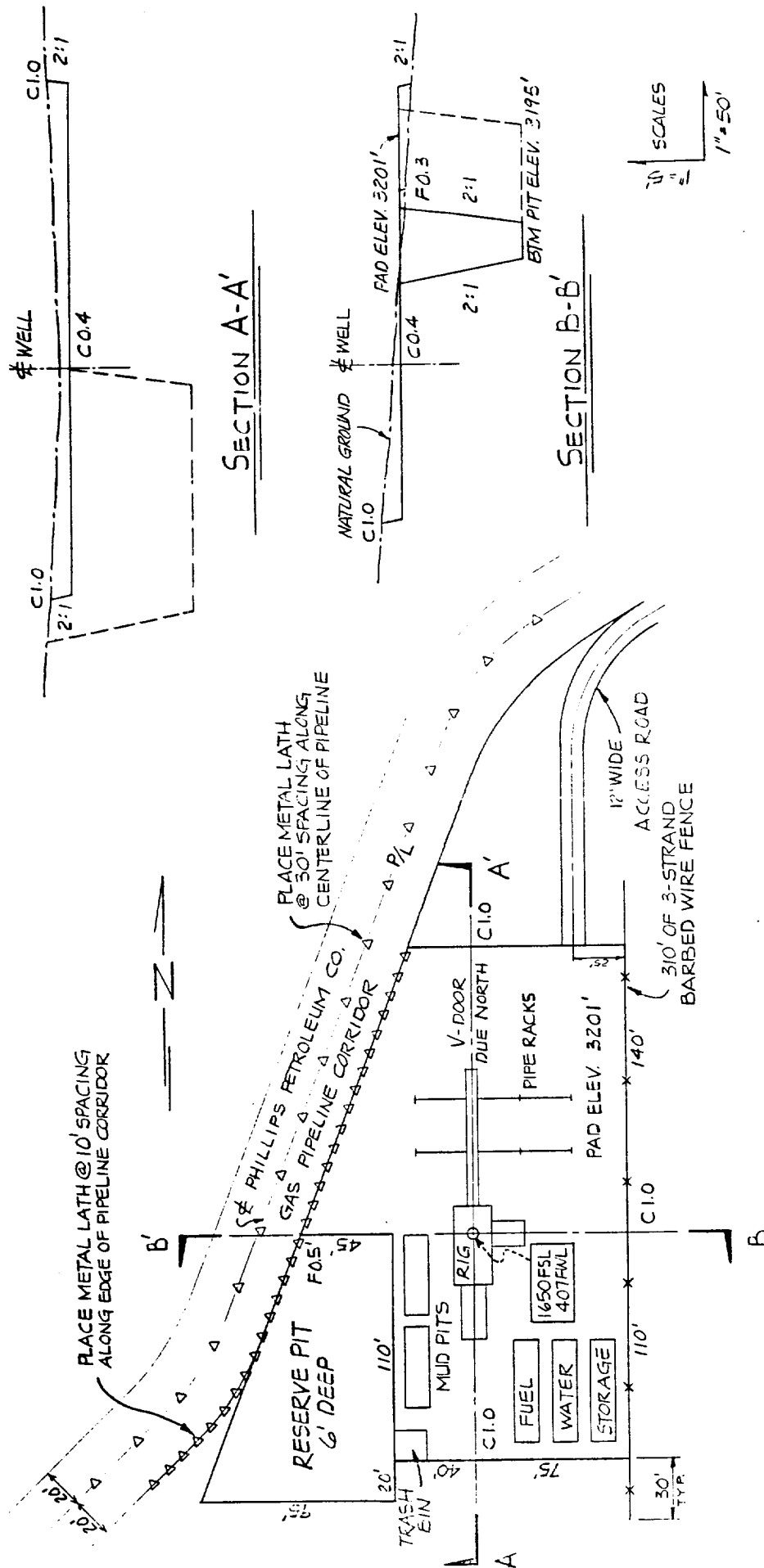


Exhibit "A"
EXXON'S
BURTON FLAT FED. "E" #3
SEC. 1, T-21-S, R-27-E
EDDY CO., N.M.
SCALE: 1"-2000'
SMW **7/8/85**



PLAN
SCALE: 1"=30'

EXHIBIT "D"

BUNTON FLAT FEDERAL "E" #3 SEC. 1, T&S, R 27E EDDY CO., NEW MEXICO		EXXON COMPANY U.S.A. is a division of Exxon Corporation PRODUCTION DEPARTMENT	
DRAWN <i>clv</i>	ENGR. SECTION <i>1-1</i>	DATE <i>12-2-82</i>	FILE NO.
CHECKED	APPROVED	JOB NO.	SCALE <i>5"=100'</i>
		W-B-2032	