

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.
30-025-09969

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.
B-934

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.)

7. Lease Name or Unit Agreement Name
New Mexico "S" State

1. Type of Well:
OIL WELL GAS WELL OTHER

8. Well No.
20

2. Name of Operator
Exxon Corp. (Regulatory Affairs PC #3)

9. Pool name or Wildcat
Tubb

3. Address of Operator
P. O. Box 1600, Midland, TX 79702

4. Well Location
Unit Letter E : 2100 Feet From The North Line and 500 Feet From The West Line

Section 2 Township 22S Range 37E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK PLUG AND ABANDON
TEMPORARILY ABANDON CHANGE PLANS
PULL OR ALTER CASING
OTHER: Abandon Drinkard & Frac Tubb

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING
COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
CASING TEST AND CEMENT JOB
OTHER:

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.

Set a CIBP at 6230 w/ ^{3.5} 20' cmt to abandon Drinkard perfs 6260 - 6490'. Acid & frac existing Tubb perfs (5825 - 6150') with 630 gal acetic ac + 69,200 gal gel + 152000# 20/40 sand. Return to production.

Minimum BOP will be double ram 2000# WP.

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

SIGNATURE Alex M. Correa TITLE Administrative Specialist DATE 10-19-90
TYPE OR PRINT NAME Alex M. Correa TELEPHONE NO. 915-688-7532

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

OCT 25 1990

REC-21

OCT 24 1990

**OCB
HOBAS OFFICE**

Submit to Appropriate
District Office
State Lease-4 copies
Fee Lease-3 copies

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

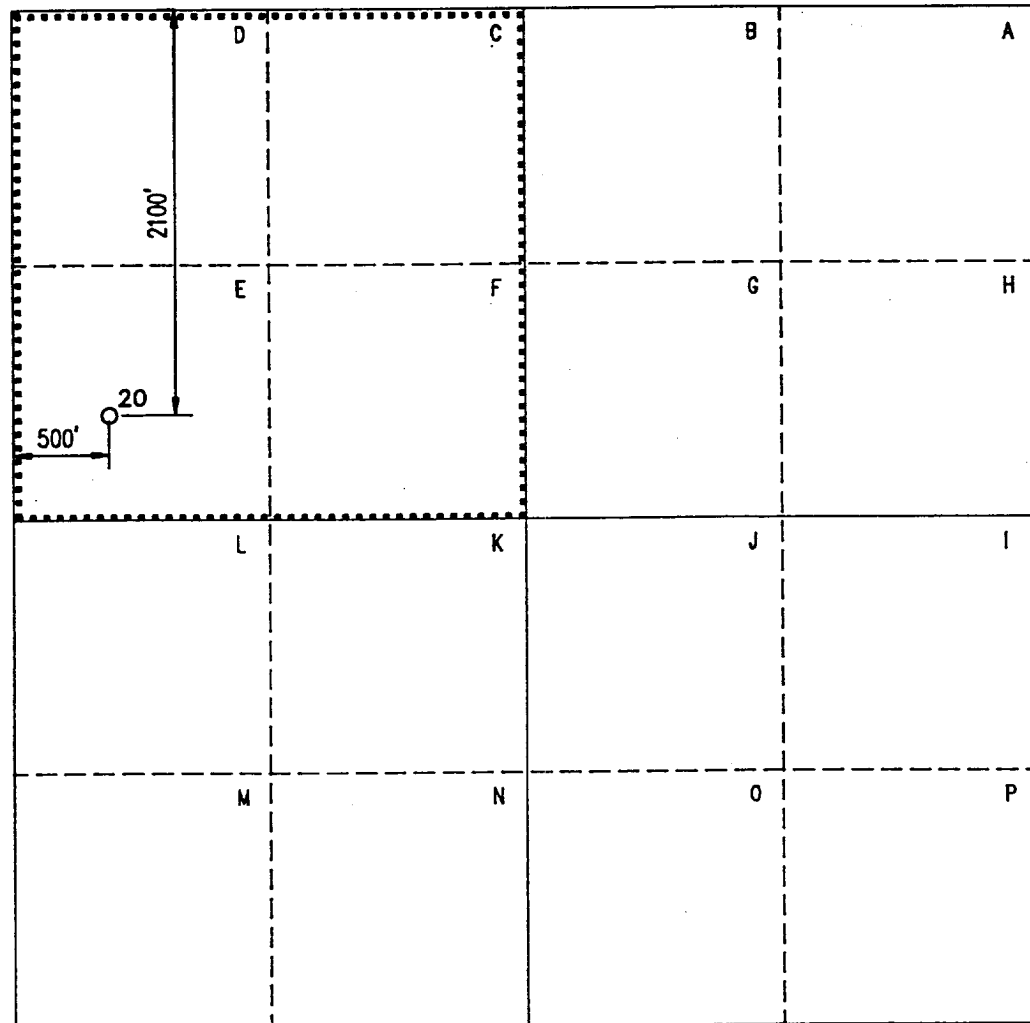
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

// All distances must be from the outer boundaries of the Section.

| | | | | | |
|----------------------------------------------------------------------------------------------------|-----------------------------|------------------|-------------------------------|---------------------------------|----------------|
| Operator Exxon Corporation | | | Lease NEW MEXICO "S" STATE | | Well No. 20 |
| Unit Letter E | Section 2 | Township 22/S | Range 37/E | County LEA | |
| Actual Footage Location of Well: 2100 feet from the NORTH line and 500 feet from the WEST line. | | | | | |
| Ground level Elev. 3388' | Producing Formation TUBB | Pool TUBB | | Dedicated Acreage: 160 Acres | |

- Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
 - If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
 - If more than one lease of different ownership is dedicated to the well, have the interest 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 interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature
Charlotte Harper

Printed Name
Charlotte Harper

Position
PERMITS SUPERVISOR

Company Exxon Corporation
P.O. Box 1600-Midland, Tx.-79702

Date
10-17-90

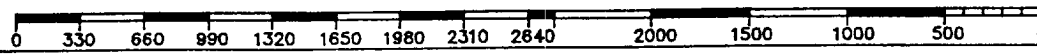
SURVEYOR CERTIFICATION

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 and belief.

Date Surveyed
4/09/49

Signature & Seal of
Professional Surveyor

Certificate No.



2 Miles SE of EUNICE, New Mexico.

C.E. File No. A-10497

RECEIVED

OCT 24 1980

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HOBBS OFFICE