OF OPIES RECEIVED			Form C-103 Supersedes Old
DISTRIBUTION	()		
SANTA FE	NEW LEXICO OIL CONSERVATION COMMISSION		C-102 and C-103 Effective 1-1-65
FILE			
U.S.G.S.			Sa. Indicate Type of Lease
LAND OFFICE			State X Fee
OPERATOR			5. 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.)			
1.	,		7. Unit Agreement Name
OIL GAS WELL WELL	other. Water Source W	Vell	
2. Name of Operator			8. Farm or Lease Name
Exxon Corporation			New Mexico "S" State
3. Address of Operator			9. Well No. WS-4 CP-427
Box 1600, Midland, TX 79701			1
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER M 650 FEET FROM THE WEST LINE AND 175 FEET FROM			Eunice (South San Andre
UNIT LETTER,			
THE South LINE, SECTION 2 TOWNSHIP 22-S RANGE 37-E NMPM.			
15. Elevation (Show whether DF, RT, GR, etc.)			12. County
	DF 3383		Lea
16.		leture of Nation Penast of C	ther Data
Che	ck Appropriate Box To Indicate N		THE Data
NOTICE O	F INTENTION TO:	SUBSEQUE	II REPORT OF:
			
PERFORM REMEDIAL WORK	PLUG AND ABANDON X	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	<u></u>	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
	<u></u>	OTHER	
OTHER			
17 Describe Proposed or Complete	ed Operations (Clearly state all pertinent det	ails, and give pertinent dates, includi	ng estimated date of starting any proposed
work) SEE RULE 1103.			
with 12 sacks of If a leak is for brine to surfact brine. Spot a Leave a 10' cen	ment plug at the surface. It all plugs do	tbg. and test casing for a 35 sack plug. Circle 25 sacks of salt gel per 50-1050'. Spot a 46 sa	For possible leak. Eulate mud laden er 100 lbs. of 9.5# ack cement plug from 170-350 pnment. Use Class C
18. I hereby certify that the inform	nation above is true and complete to the best	of my knowledge and belief.	
i V NI	1		0.10.70
SIGNED W	title	Unit Head	DATE <u>3-19-76</u>
			* * * * * * * * * * * * * * * * * * * *
ABBROYER	YITLE		DATE

CONDITIONS OF APPROVAL, IF ANY:

Form C-103