

State of New Mexico
Energy, Minerals and Natural Resources Department

Submit to Appropriate
District Office
State Lease -- 6 copies
Fee Lease -- 5 copies

Form C 101
Revised 1-1-89

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

API NO. (assigned by OCD on New Wells) 3002510132
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. FEE
7. Lease Name or Unit Agreement Name J L GREENWOOD
8. Well No. 11
9. Pool name or Wildcat PADDOCK

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:
 DRILL RE-ENTER DEEPEN PLUG BACK

1b. Type of Well:
 oil WELL GAS WELL OTHER SINGLE ZONE MULTIPLE ZONE

2. Name of Operator
EXXON CORPORATION

3. Address of Operator
**ATTN: REGULATORY AFFAIRS ML#14
P. O. BOX 1600
MIDLAND, TX 79702**

4. Well Location
 Unit Letter **I** : **1880** Feet From The **SOUTH** Line and **760** Feet From The **EAST** Line
 Section **9** Township **22S** Range **37E** NMPM **LEA** County

10. Proposed Depth 7501	11. Formation PADDOCK	12. Rotary or C.T. ROTARY
13. Elevations (Show whether DF, RT, GR, etc.) 3427 DF	14. Kind & Status Plug. Bond BLANKET	15. Drilling Contractor UNKNOWN
		16. Approx. Date Work will start ASAP

17. **PROPOSED CASING AND CEMENT PROGRAM**

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
13 3/4	10 3/4	40.5	394	300	SURF.
9 7/8	7 5/8	26.4	3031	850	900'
6 3/4	5 1/2	17, 15.5, 14	7498	650	2340'

- SET CIBP AT 5400' W/35' CMT. TO ABANDON BLINEBRY AND DRINKARD PERFS.
 - PERF. GLORIETA AND PADDOCK FORM APPROX. 5034'-5196', AC. APPROX. 6000 GAL.
 - RETURN WELL TO PRODN. IN PADDOCK OIL POOL. Permit Expires 6 Months From Approval Date Unless Drilling Underway.
 - C-102 IS ATTACHED.
- Plugback*

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. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE *Alex M. Correa* TITLE Sr. Regulatory Specialist DATE 02/05/96

TYPE OR PRINT NAME Alex M. Correa (915) 688-6782 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE FEB 07 1996

CONDITIONS OF APPROVAL, IF ANY: