

EXXON COMPANY, U.S.A.

POST OFFICE BOX 1600 • MIDLAND, TEXAS 79702-1600

CONSERVATION DIVISION
RECEIVED

JUL 31 1995

MIDLAND PRODUCTION ORGANIZATION

OPERATIONS INTEGRITY

July 31, 1995

Simultaneous Dedication
Well Nos. 1, 5, 9, 12 and 13
Unorthodox Locations
Well Nos. 5, 12
John D. Knox Lease
Section 10, T21S, R36E
Lea County, NM
Eumont Yates 7 Rvrs Qn (Pro Gas) Pool

Mr. William J. LeMay
New Mexico Oil Conservation Division
2040 South Pacheco
Santa Fe, New Mexico 87505

Dear Mr. LeMay:

Exxon Corp. requests administrative approval of Simultaneous Dedication for well nos. 1, 5, 9, 12, 13 and Unorthodox Locations for nos. 5 and 12, which will be plugged back. A 320 acre, Non-Standard gas proration unit was approved 01/24/55, NSP 77A and Simultaneous Dedication of nos. 1, 9, and 13 was approved 12/01/94, NSL 3440 (SD). A copy of the offset operator notifications, C-102 and C-103 for each well are attached. If you have any questions, please call me at (915) 688-6782.

Sincerely,



Alex M. Correa

amc-lemay4.doc

SENDER:

Complete items 1 and/or 2 for additional services. Complete items 3 and 4a & b.

Print your name and address on the reverse of this form so that we can return this card to you.

Attach this form to the front of the mailpiece, or on the back if space does not permit.

Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

ARCO OIL & GAS COMPANY
ATTN: LAND DEPT.
P.O. BOX 1610
MIDLAND, TX 79702-1610

Signature (Addressee)

Signature (Agent)

S Form 3811, December 1991

U.S. GPO: 1989-352-714

DOMESTIC RETURN RECEIPT

1. I also wish to receive the following services (for an extra fee):
1. ☒ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee

4a. Article Number: 2740407899

4b. Service Type: ☐ Registered ☐ Insured

☒ Certified ☐ COD

☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery: JUL 12 1995

8. Addressee's Address (Only if requested and fee is paid)

Signature (Addressee)

Signature (Agent)

S Form 3811, December 1991

U.S. GPO: 1989-352-714

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service

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3. Article Addressed to:

AMERADA HESS CORPORATION
ATTN: LAND DEPT.
1201 LOUISIANA, STE. 700
HOUSTON, TX 77002

Signature (Addressee)

Signature (Agent)

S Form 3811, December 1991

U.S. GPO: 1989-352-714

DOMESTIC RETURN RECEIPT

1. I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee

4a. Article Number: 2740407817

4b. Service Type: ☐ Registered ☐ Insured

☒ Certified ☐ COD

☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery: 7-14-95

8. Addressee's Address (Only if requested and fee is paid)

Signature (Addressee)

Signature (Agent)

S Form 3811, December 1991

U.S. GPO: 1989-352-714

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service

SENDER:

Complete items 1 and/or 2 for additional services. Complete items 3 and 4a & b.

Print your name and address on the reverse of this form so that we can return this card to you.

Attach this form to the front of the mailpiece, or on the back if space does not permit.

Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

DAVID H. ARRINGTON
P.O. BOX 2071
MIDLAND, TX 79702

Signature (Addressee)

Signature (Agent)

S Form 3811, December 1991

U.S. GPO: 1989-352-714

DOMESTIC RETURN RECEIPT

1. I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☒ Restricted Delivery
Consult postmaster for fee

4a. Article Number: 2740407818

4b. Service Type: ☐ Registered ☐ Insured

☒ Certified ☐ COD

☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery:

8. Addressee's Address (Only if requested and fee is paid)

Signature (Addressee)

Signature (Agent)

S Form 3811, December 1991

U.S. GPO: 1989-352-714

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service

SENDER:

Complete items 1 and/or 2 for additional services. Complete items 3 and 4a & b.

Print your name and address on the reverse of this form so that we can return this card to you.

Attach this form to the front of the mailpiece, or on the back if space does not permit.

Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

AMOCO PRODUCTION COMPANY
ATTN: LAND DEPT.
P.O. BOX 3092
HOUSTON, TX 77253

Signature (Addressee)

Signature (Agent)

S Form 3811, December 1991

U.S. GPO: 1989-352-714

DOMESTIC RETURN RECEIPT

1. I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☒ Restricted Delivery
Consult postmaster for fee

4a. Article Number: 2740407823

4b. Service Type: ☐ Registered ☐ Insured

☒ Certified ☐ COD

☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery: JUL 14 1995

8. Addressee's Address (Only if requested and fee is paid)

Signature (Addressee)

Signature (Agent)

S Form 3811, December 1991

U.S. GPO: 1989-352-714

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service

SENDER:

Complete items 1 and/or 2 for additional services.

Complete items 3 and 4a & b. Print your name and address on the reverse of this form so that we can return this card to you.

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3. Article Addressed to:

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address2. ☐ Restricted Delivery

Consult postmaster for fee

4a. Article Number

4b. Service Type

☐ Registered☐ Insured☒ Certified☐ COD☐ Express Mail☐ Return Receipt for Merchandise

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service

PS Form 3811, December 1991

*U.S. GPO: 1993-352-714

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Consult postmaster for fee

4a. Article Number

4b. Service Type

☐ Registered☐ Insured☒ Certified☐ COD☐ Express Mail☐ Return Receipt for Merchandise

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service

PS Form 3811, December 1991

*U.S. GPO: 1993-352-714

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Consult postmaster for fee

4a. Article Number

4b. Service Type

☐ Registered☐ Insured☒ Certified☐ COD☐ Express Mail☐ Return Receipt for Merchandise

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service

PS Form 3811, December 1991

*U.S. GPO: 1993-352-714

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1. ☐ Addressee's Address2. ☐ Restricted Delivery

Consult postmaster for fee

4a. Article Number

4b. Service Type

☐ Registered☐ Insured☒ Certified☐ COD☐ Express Mail☐ Return Receipt for Merchandise

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service

PS Form 3811, December 1991

*U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

SENDER:
Complete items 1 and/or 2 for additional services.
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The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

ME-TEX OIL & GAS INC.
401 W. TAYLOR
HOBBS, NM 88240

Signature (Agent) *Alfred J. Sperry*
Signature (Addressee)

7. Date of Delivery *11/14/95*
8. Addressee's Address (Only if requested and fee is paid)
JUL 14 1995

4a. Article Number *2440 407 824*
4b. Service Type
☒ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

1. ☐ Addressee's Address
2. ☒ Restricted Delivery
Consult postmaster for fee.

1 also wish to receive the following services (for an extra fee):

Thank you for using Return Receipt Service.

SENDER:
Complete items 1 and/or 2 for additional services.
Complete items 3, and 4a, b.
Print your name and address on the reverse of this form so that we can return this card to you.
Attach this form to the front of the mailpiece or, on the back if space does not permit.
Write "Return Receipt Requested" on the mailpiece below the article number.
The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

HEADINGTON OIL CO.
7557 RAMBLER RD, STE. 100
DALLAS, TX 75231

Signature (Agent) *Alfred J. Sperry*
Signature (Addressee)

7. Date of Delivery *11/14/95*
8. Addressee's Address (Only if requested and fee is paid)

4a. Article Number *2440 407 824*
4b. Service Type
☒ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

1. ☐ Addressee's Address
2. ☒ Restricted Delivery
Consult postmaster for fee.

1 also wish to receive the following services (for an extra fee):

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Attach this form to the front of the mailpiece or, on the back if space does not permit.
Write "Return Receipt Requested" on the mailpiece below the article number.
The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

MERIDIAN OIL INC.
ATTN: LAND DEPT.
P.O. BOX 51810
MIDLAND, TX 79710

Signature (Agent) *Alfred J. Sperry*
Signature (Addressee)

7. Date of Delivery *11/14/95*
8. Addressee's Address (Only if requested and fee is paid)

4a. Article Number *2440 407 824*
4b. Service Type
☒ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

1. ☐ Addressee's Address
2. ☒ Restricted Delivery
Consult postmaster for fee.

1 also wish to receive the following services (for an extra fee):

Thank you for using Return Receipt Service.

SENDER:
Complete items 1 and/or 2 for additional services.
Complete items 3, and 4a, b.
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Attach this form to the front of the mailpiece or, on the back if space does not permit.
Write "Return Receipt Requested" on the mailpiece below the article number.
The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

JOHN H. HENDRIX CORPORATION
P.O. BOX 3040
MIDLAND, TX 79702-3040

Signature (Agent) *Alfred J. Sperry*
Signature (Addressee)

7. Date of Delivery *11/14/95*
8. Addressee's Address (Only if requested and fee is paid)

4a. Article Number *2440 407 824*
4b. Service Type
☒ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

1. ☐ Addressee's Address
2. ☒ Restricted Delivery
Consult postmaster for fee.

1 also wish to receive the following services (for an extra fee):

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3 and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☒ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

TEXAS CRUDE INC.
P.O. BOX 56586
HOUSTON, TX 77256

4a. Article Number
2740 407 822

4b. Service Type

☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
18 JUL 1995

5. Signature (Addressee)
J. Snell

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

JUL 20 1995

PS Form 3811, December 1991 U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3 and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

THE WISER OIL CO.
8115 PRESTON ROAD, STE. 400
DALLAS, TX 75225-6311

4a. Article Number
2740 407 828

4b. Service Type

☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
7-13-95

5. Signature (Addressee)
W. W. W. W.

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

JUL 17 1995

PS Form 3811, December 1991 U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

EXXON COMPANY, U.S.A.
POST OFFICE BOX 1600 • MIDLAND, TEXAS 79702-1600

MIDLAND PRODUCTION ORGANIZATION
OPERATIONS INTEGRITY

July 11, 1995

John D. Knox Lease
Simultaneous Dedication
Well Nos. 1, 5, 9, 12, 13
Unorthodox Locations
Well Nos. 5, 12
Section 10, T21S, R36E
Lea County, NM
Eumont Yates 7 Rvrs Qn (Pro Gas)

Offset Operators

Gentlemen:

Exxon Corp. is requesting administrative approval of Simultaneous Dedication for the John D. Knox well nos. 1, 5, 9, 12 and 13 in the Eumont Yates 7 Rvrs Qn (Pro Gas) Pool and Unorthodox Locations for nos. 5 and 12. Nos. 5 and 12 will be plugged back to the Yates, 7 Rvrs and Queen and become gas wells. A copy of the C-102 and C-103 for each well are attached. If you have any questions, please call me at (915) 688-6782.

Sincerely,



Alex M. Correa

amc-offsets5.doc
Attachments

**OFFSET OPERATORS
EXXON CORP.
J. D. KNOX LEASE
SECTION 10, T21S-R36E
LEA COUNTY, NEW MEXICO**

AMERADA HESS CORPORATION
ATTN: LAND DEPT.
1201 LOUISIANA, STE. 700
HOUSTON, TX 77002

AMOCO PRODUCTION COMPANY
ATTN: LAND DEPT.
P.O. BOX 3092
HOUSTON, TX 77253

ARCO OIL & GAS COMPANY
ATTN: LAND DEPT.
P.O. BOX 1610
MIDLAND, TX 79702-1610

DAVID H. ARRINGTON OIL & GAS
P.O. BOX 2071
MIDLAND, TX 79702

LEWIS B. BURLESON
P.O. BOX 2479
MIDLAND, TX 79702

CHEVRON USA INC.
ATTN: LAND DEPT.
P.O. BOX 1150
MIDLAND, TX 79702

CONOCO INC.
ATTN: J. W. HOOVER
10 DESTADRIVE, STE. 100W
MIDLAND, TX 79705

DEVON ENERGY CORPORATION
1500 MID-AMERICA TOWER
20 N. BROADWAY
OKLAHOMA CITY, OK 73102-8260

HEADINGTON OIL CO.
7557 RAMBLER RD., STE. 1150
DALLAS, T 75231

JOHN H. HENDRIX CORPORATION
P.O. BOX 3040
MIDLAND, TX 79702-3040

ME-TEX OIL & GAS INC.
401 W. TAYLOR
HOBBS, NM 88240

MERIDIAN OIL INC.
ATTN: LAND DEPT.
P.O. BOX 51810
MIDLAND, TX 79710

ORYX ENERGY COMPANY
ATTN: LAND DEPT.
P.O. BOX 2880
DALLAS, TX 75221-2880

OXY USA INC.
ATTN: LAND DEPT.
P.O. BOX 50250
MIDLAND, TX 79710

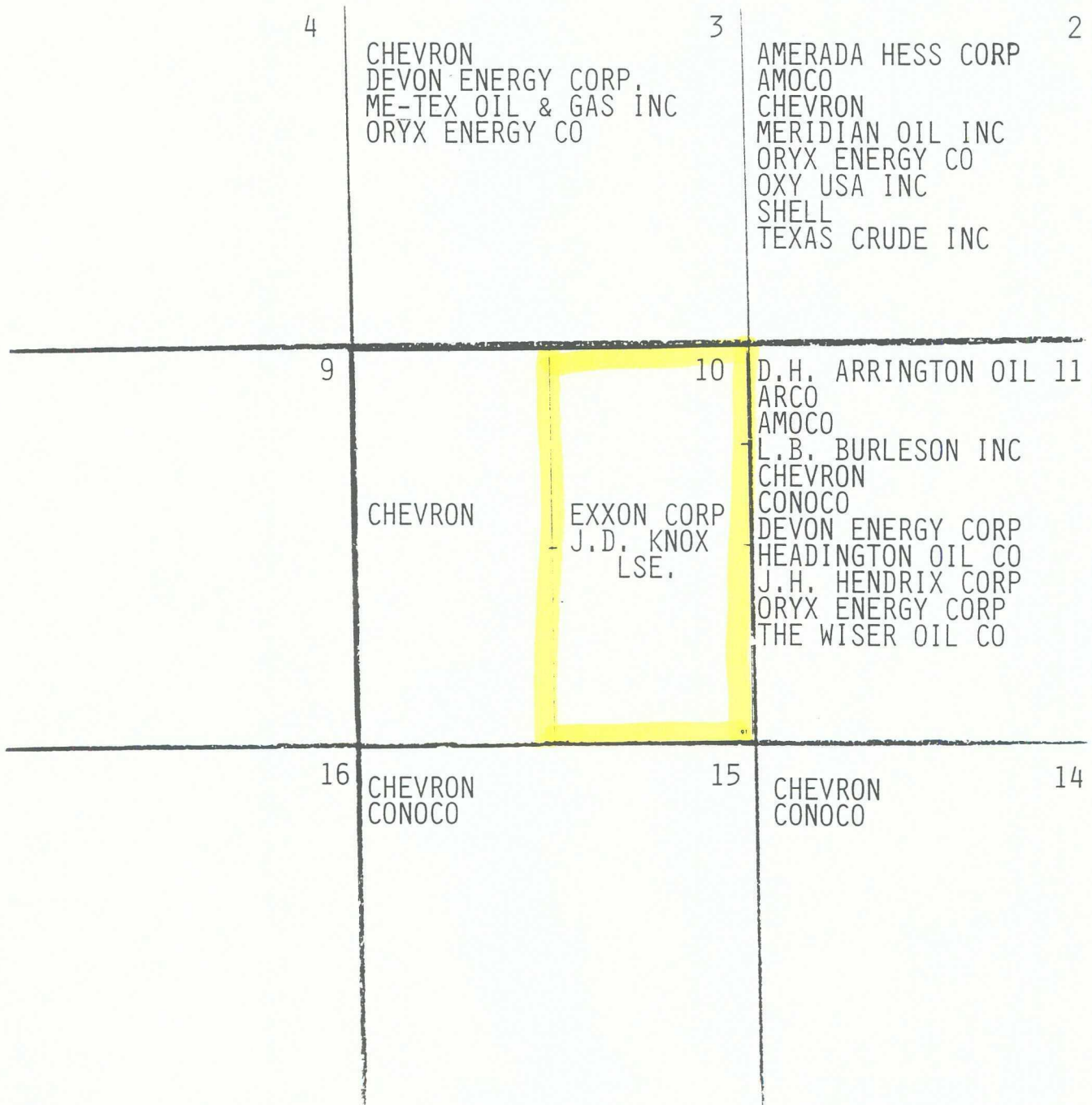
SHELL WESTERN E & P INC.
ATTN: LAND DEPT.
200 N. DAIRY ASHFORD
HOUSTON, TX 77079

TEXAS CRUDE INC.
P.O. BOX 56586
HOUSTON, TX 77256

THE WISER OIL CO.
8115 PRESTON ROAD, STE. 400
DALLAS, TX 75225-6311

OFFSET OPERATORS

EXXON CORP.
JOHN D. KNOX LEASE
E2, SEC. 10, T21S, R36E
LEA COUNTY, NM



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. 3002504595	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name JOHN D KNOX	
8. Well No. 1	
9. Pool name or Wildcat EUMONT YATES 7 RVRS QN (PRO GAS)	

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" (FORMC-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
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 J : 1980 Feet From The SOUTH Line and 1980 Feet From The EAST Line Section 10 Township 21S Range 36E NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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: **SIMO DEDICATION 1,5,9,12,13** ☒

SUBSEQUENT REPORT OF:

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

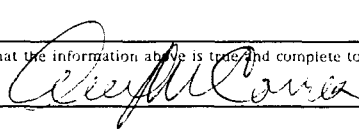
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

**ADMINISTRATIVE APPROVAL FROM SANTA FE HAS BEEN REQUESTED FOR
SIMULTANEOUS DEDICATION OF #'S 1,5,9,12,13 IN THE E2 OF SEC. 10. A 320
AC. NON-STANDARD GAS PRORATION UNIT APPROVED 01/24/55, NSP 77A AND
SIMULTANEOUS DEDICATION OF #'S 1,9,13 APPROVED 12/01/94, NSL 3440(SD).**

OFFSETS HAVE BEEN NOTIFIED.

C-102 IS ATTACHED.

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

SIGNATURE  TITLE Sr. Regulatory Specialist DATE 06/01/95

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

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
PO Drawer DD, Artesia, NM 88211-0719

District III
1000 Rio Brasos Rd., Aztec, NM 87410

District IV
PO Box 2088, Santa Fe, NM 87504-2088

STATE OF NEW MEXICO
Energy, Minerals & Natural Resources Department

Form G-102
Revised February 10, 1994
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

OIL CONSERVATION DIVISION

PO Box 2088
Santa Fe, NM 87504-2088

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-04595	Pool Code 76480	Pool Name EUMONT YATES 7 RVRS. QN. (PRO. GAS)
Property Code 004185	Property Name JOHN D. KNOX	Well Number 1
GRID No. 007673	Operator Name Exxon Corporation	Elevation 3587

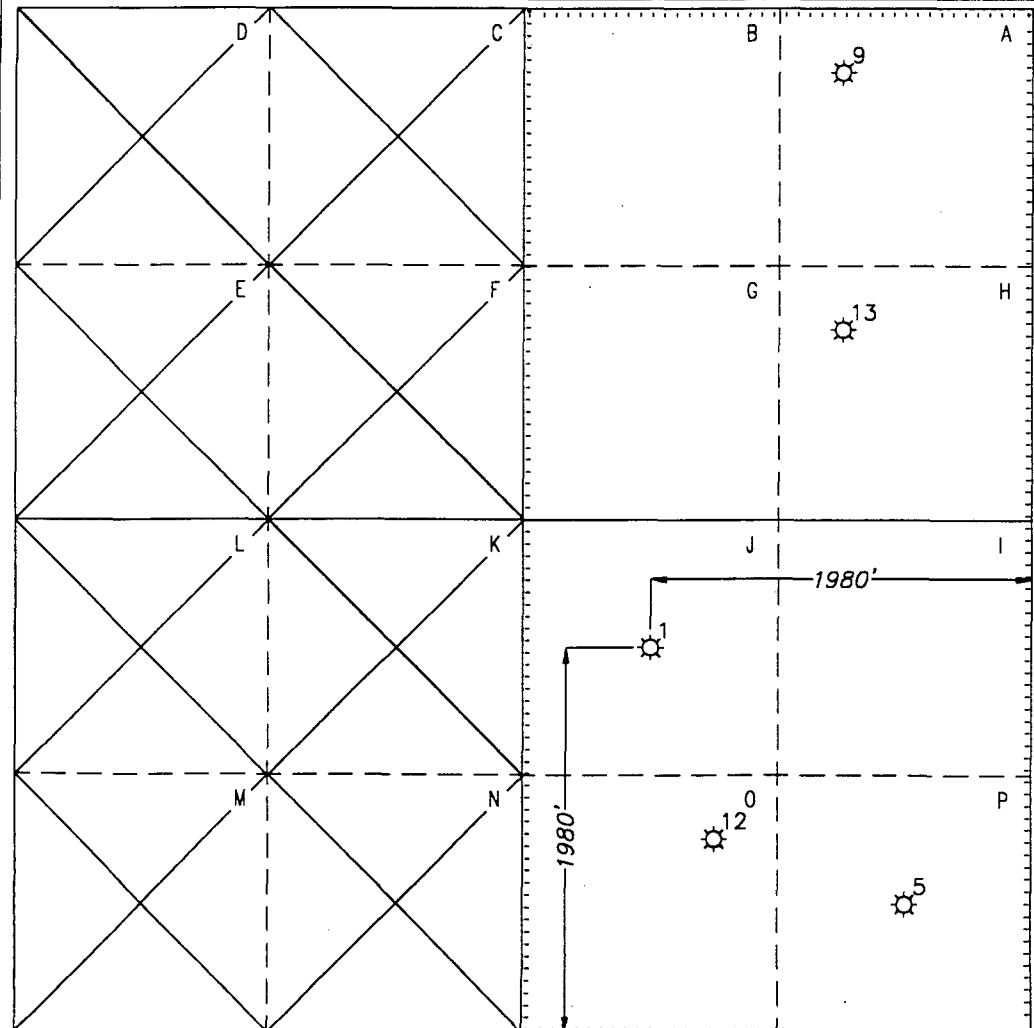
Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
J	10	21-S	36-E		1980'	SOUTH	1980'	EAST	LEA

Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres 320	Joint or Infill	Consolidation Code	Order No.						

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNIT. ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	<h3>OPERATOR CERTIFICATION</h3> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p><i>C.H. Harper</i> 6/12/95 Signature C.H. Harper Printed Name Permits Supervisor Title Date</p> <h3>SURVEYOR CERTIFICATION</h3> <p>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 belief.</p> <p>1/16/36 Date of Survey Signature and Seal of Professional Surveyor.</p> <p>Certificate Number</p>
--	---

Distance to nearest Town 6.6 Miles NW of EUNICE New Mexico	Drawn By S.R. Patterson	Date 6/2/95	Drawing File Name C.F. File No. A10940
---	----------------------------	----------------	---

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. 3002504599	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No. FEE	
7. Lease Name or Unit Agreement Name JOHN D KNOX	
8. Well No. 5	
9. Pool name or Wildcat EUMONT YATES 7 RVRS QN (PRO GAS)	

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" (FORMC-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
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 P : 660 Feet From The SOUTH Line and 660 Feet From The EAST Line Section 10 Township 21S Range 36E NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3594 DF	

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: **PB, SIMO. DED. #'1,5,9,12,13** ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG & 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.

WELL IS CURRENTLY ON PRORATION SCH. IN EUNICE MONUMENT; GRAYBURG-SAN ANDRES, EUNICE MONUMENT SOUTH UNIT OPERATED BY CHEVRON. WELL WAS NEVER TURNED OVER TO CHEVRON SO EXXON IS STILL THE OPERATOR.

PB FROM EUNICE MONUMENT; GRAYBURG-SAN ANDRES TO EUMONT YATES 7 RVRS QN (PRO GAS). PERF. QN. APPROX. 3500'-3700', FRAC APPROX. 40000 GAL. + 160000 # SD.; PERF. 7 RVRS. APPROX. 3070'-3330', FRAC APROX. 40000 GAL. + 160000 # SD.

ADMINISTRATIVE APPROVAL FROM SANTA FE HAS BEEN REQUESTED FOR AN UNORTHODX LOCATION, SIMULTANEOUS DEDICATION OF #'S 1,5,9,12,13 IN THE E2 OF SEC. 10. A 320 AC. NON-STANDARD GAS PRORATION UNIT WAS APPROVED 01/24/55, NSP 77A AND SIMULTANEOUS DEDICATION OF #'S 1,9,13 WAS APPROVED 12/01/94, NSL 3440(SD). OFFSETS HAVE BEEN NOTIFIED. C-102 & 103 ATTACHED.

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 06/28/95
TYPE OR PRINT NAME Alex M. Correa (915) 688-6782 TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
PO Drawer DD, Artesia, NM 88211-0719

District III
1000 Rio Brasas Rd., Aztec, NM 87410

District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised February 10, 1994
Submit to Appropriate District Office
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Fee Lease - 3 Copies

OIL CONSERVATION DIVISION

PO Box 2088
Santa Fe, NM 87504-2088

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-04599	Pool Code 76480	Pool Name EUMONT YATES 7 RVRS. QN. (PRO. GAS)
Property Code 004185	Property Name JOHN D. KNOX	Well Number 5
OGRID No. 007673	Operator Name Exxon Corporation	Elevation

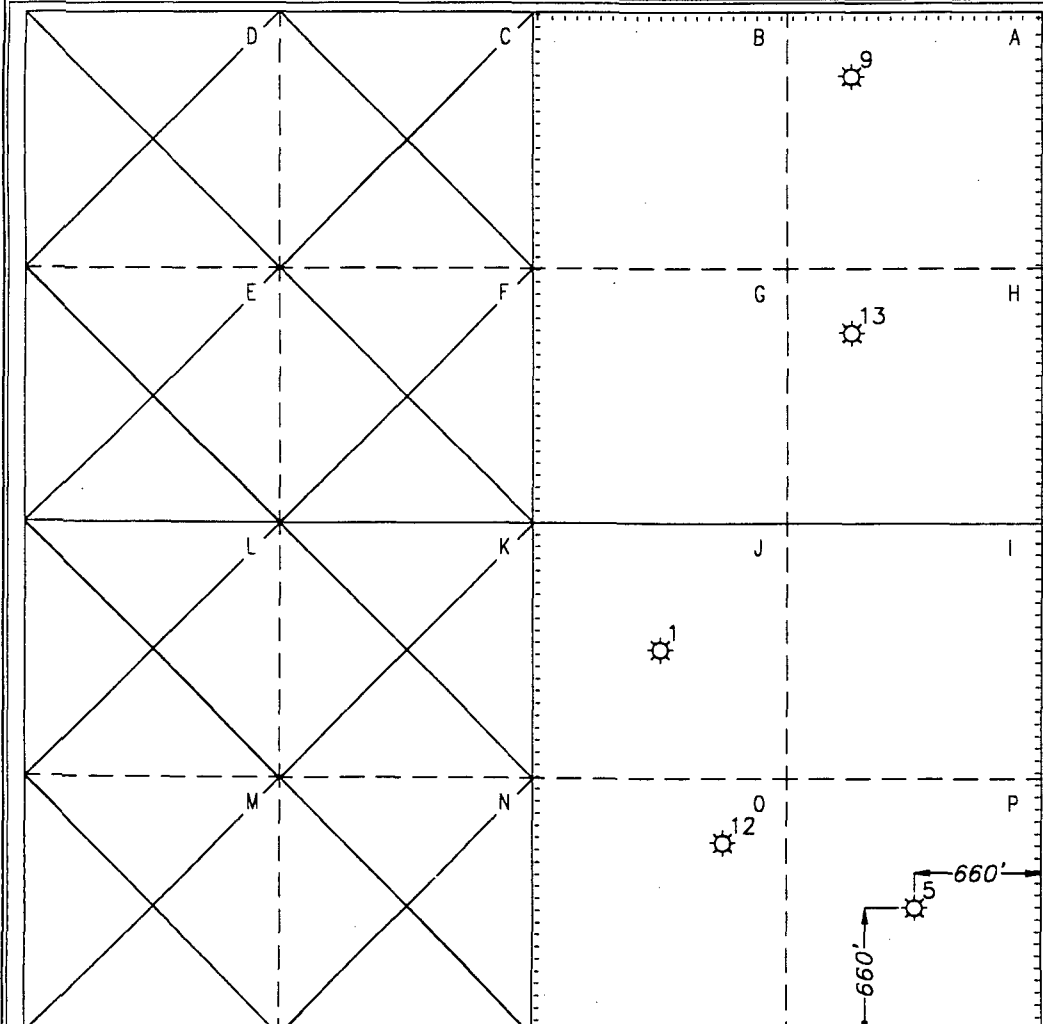
Surface Location

UL or lot no. P	Section 10	Township 21-S	Range 36-E	Lot Idn	Feet from the 660'	North/South line SOUTH	Feet from the 660'	East/West line EAST	County LEA
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Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres 320	Joint or Infill	Consolidation Code	Order No.						

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNITL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	<h3>OPERATOR CERTIFICATION</h3> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p>Signature <u>C.H. Harper</u> 6/12/95</p> <p>Printed Name <u>C.H. Harper</u></p> <p>Title <u>Permits Supervisor</u></p> <p>Date</p>
	<h3>SURVEYOR CERTIFICATION</h3> <p>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 belief.</p> <p>8/17/34</p> <p>Date of Survey</p> <p>Signature and Seal of Professional Surveyor.</p> <p>Certificate Number</p>

Distance to nearest Town 6.6 Miles NW of EUNICE New Mexico	Drawn By S.R. Patterson	Date 6/2/95	Drawing File Name C.E. File No. A10973
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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. 3002520166
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name JOHN D KNOX
8. Well No. 9
9. Pool name or Wildcat EUMONT YATES 7 RVRS QN (PRO GAS)

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. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
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 A : 330 Feet From The NORTH Line and 990 Feet From The EAST Line Section 10 Township 21S Range 36E NMPM LEA County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3751 KB	

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: **SIMO DEDICATION #'S 1,5,9,12,13** ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG & 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.

ADMINISTRATIVE APPROVAL FROM SANTA FE HAS BEEN REQUESTED FOR
SIMULATNEOUS DEDICATION OF #'S 1,5,9,12,13 IN E2, SEC 10. A 320 AC.
NON-STANDARD GAS PRORATION UNIT WAS APPROVED 01/24/55, NSP 77A AND
SIMULTANEOUS DEDICATION OF #'S 1,9,13 AND AN UNORTHODOX LOCATION FOR #9
WAS APPROVED 12/01/94, NSL 3440(SD).

OFFSETS HAVE BEEN NOTIFIED.

C-102 IS ATTACHED.

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 06/14/95

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

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
PO Drawer DD, Artesia, NM 88211-0719

District III
1000 Rio Brasos Rd., Aztec, NM 87410

District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised February 10, 1994
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OIL CONSERVATION DIVISION

PO Box 2088
Santa Fe, NM 87504-2088

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-20166	Pool Code 76480	Pool Name EUMONT YATES 7 RVRS. QN. (PRO. GAS)
Property Code 004185	Property Name JOHN D. KNOX	Well Number 9
OGRID No. 007673	Operator Name Exxon Corporation	Elevation 3751 DF

Surface Location

UL or lot no. A	Section 10	Township 21-S	Range 36-E	Lot Idn	Feet from the 330'	North/South line NORTH	Feet from the 990'	East/West line EAST	County LEA
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Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
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Dedicated Acres 320	Joint or Infill	Consolidation Code	Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	<h3>OPERATOR CERTIFICATION</h3> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p>6/12/95 <i>C.H. Harper</i> Signature C.H. Harper Printed Name Permits Supervisor Title Date</p> <h3>SURVEYOR CERTIFICATION</h3> <p>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 belief.</p> <p>9/9/63 Date of Survey Signature and Seal of Professional Surveyor.</p> <p>Certificate Number</p>
--	--

Distance to nearest Town 6.6 Miles NW of EUNICE New Mexico	Drawn By S.R. Patterson	Date 6/2/95	Drawing File Name C.F. File No. A10941
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Submit 3 Copies
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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. 3002520706	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No. FEE	
7. Lease Name or Unit Agreement Name JOHN D KNOX	
8. Well No. 12	
9. Pool name or Wildcat EUMONT YATES 7 RVRS QN (PRO GAS)	

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" (FORMC-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
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 O : 990 Feet From The SOUTH Line and 1652 Feet From The EAST Line Section 10 Township 21S Range 36E NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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: **PB, SIMO. DED. #'S 1,5,9,12,13** ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG & 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.

WELL IS CURRENTLY ON PRORATION SCHEDULE IN OIL CENTER; BLINEBRY.
PB TO EUMONT YATES 7 RVRS QN (PRO GAS), PERF. 7RVRS. APPROX. 3050'-3250'
FRAC APPROX. 40000 GAL. + 160000 # SD.; PERF. YATES APPROX. 2800'-2950',
FRAC APPROX. 40000 GAL. + 160000 # SD..

ADMINISTRATIVE APPROVAL FROM SANTA FE HAS BEEN REQUESTED FOR AN
UNORTHODOX LOCATION, SIMULTANEOUS DEDICATION OF #'S 1,5,9,12,13 IN THE
E2 OF SEC. 10. A 320 AC. NON-STANDARD GAS PRORATION UNIT WAS APPROVED
01/24/55, NSP 77A AND SIMULTANEOUS DEDICATION OF #'S 1,9,13 WAS APPROVED
12/01/94, NSL 3440(SD).
OFFSET OPERATORS HAVE BEEN NOTIFIED.
C-102 IS ATTACHED.

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 06/29/95
TYPE OR PRINT NAME Alex M. Correa (915) 688-6782 TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
PO Drawer DD, Artesia, NM 88211-0719

District III
1000 Rio Brasos Rd., Aztec, NM 87410

District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

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OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-20706	Pool Code 76480	Pool Name EUMONT YATES 7 RVRS. QN. (PRO. GAS)
Property Code 004185	Property Name JOHN D. KNOX	Well Number 12
OGRID No. 007673	Operator Name Exxon Corporation	Elevation

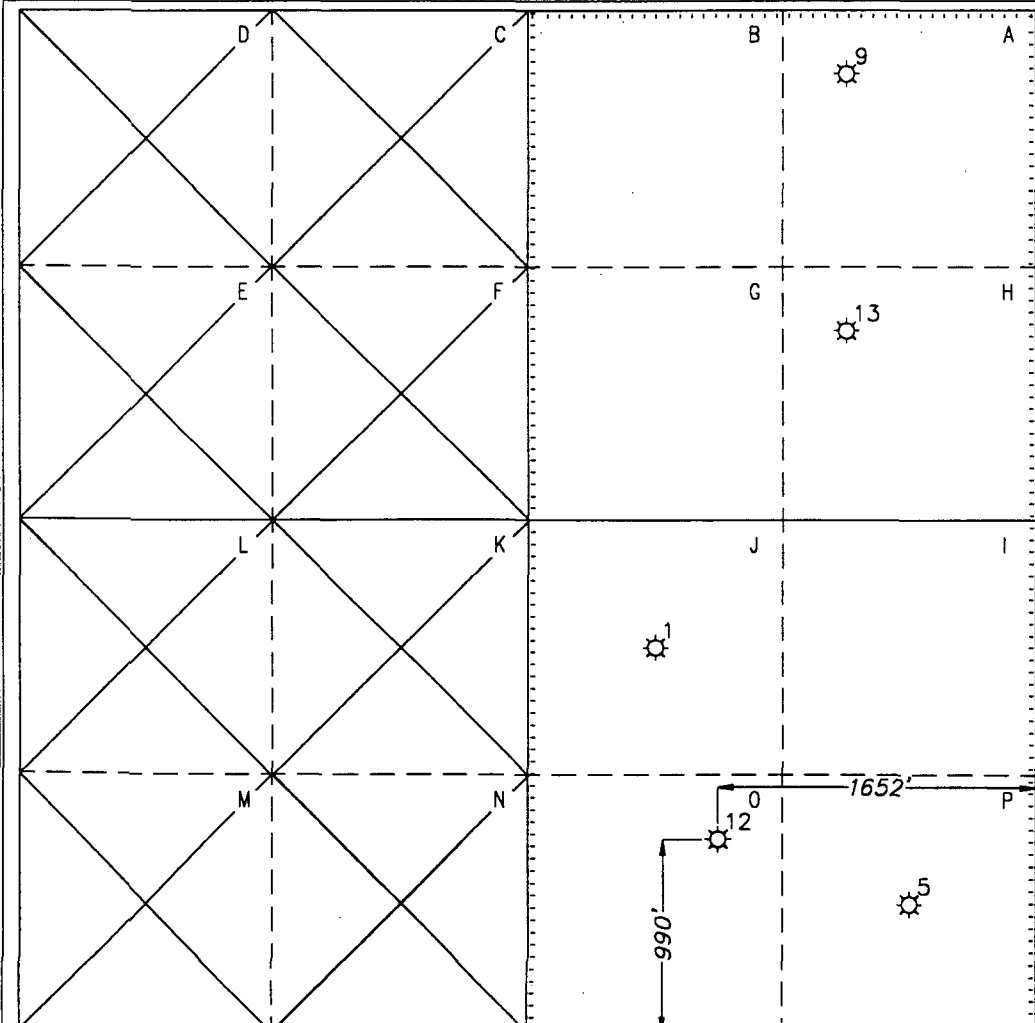
Surface Location

UL or lot no. 0	Section 10	Township 21-S	Range 36-E	Lot Idn	Feet from the 990'	North/South line SOUTH	Feet from the 1652'	East/West line EAST	County LEA
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Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres 320		Joint or Infill	Consolidation Code	Order No.					

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	<p>OPERATOR CERTIFICATION</p> <p><i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</i></p> <p>6/12/95</p> <p><i>C.H. Harper</i></p> <p>Signature</p> <p>C.H. Harper</p> <p>Printed Name</p> <p>Permits Supervisor</p> <p>Title</p> <p>Date</p> <p>SURVEYOR CERTIFICATION</p> <p><i>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 belief.</i></p> <p>12/6/63</p> <p>Date of Survey</p> <p>Signature and Seal of Professional Surveyor.</p> <p>Certificate Number</p>
--	--

Distance to nearest Town 6.6 Miles NW of EUNICE New Mexico	Drawn By S.R. Patterson	Date 6/2/95	Drawing File Name C.F. File No. A10974
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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. 3002526326
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name JOHN D KNOX
8. Well No. 13
9. Pool name or Wildcat EUMONT YATES 7 RVRS QN (PRO GAS)

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" (FORMC-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	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 H : 1650 Feet From The NORTH Line and 990 Feet From The EAST Line Section 10 Township 21S Range 36E NMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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: **SIMO DEDICATION #'S 1,5,9,12,13** ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG & 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.

ADMINISTRATIVE APPROVAL FROM SANTA FE HAS BEEN REQUESTED FOR
SIMULTANEOUS DEDICATION OF #'S 1,5,9,12,13 IN THE E2, SEC. 10. A 320 AC
NON-STANDARD GAS PRORATION UNIT WAS APPROVED 01/24/55, NSP 77A AND
SIMULTANEOUS DEDICATION OF #'S 1,9,13 WAS APPROVED 12/01/94,
NSL 3440(SD).

OFFSET OPERATORS HAVE BEEN NOTIFIED.

C-102 IS ATTACHED.

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 06/14/95
TYPE OR PRINT NAME Alex M. Correa (915) 688-6782 TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
PO Drawer DD, Artesia, NM 88211-0719

District III
1000 Rio Brasas Rd., Aztec, NM 87410

District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION

PO Box 2088
Santa Fe, NM 87504-2088

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Revised February 10, 1994
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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-26326	Pool Code 76480	Pool Name EUMONT YATES 7 RVRS. QN. (PRO. GAS)
Property Code 004185	Property Name JOHN D. KNOX	Well Number 13
OGRID No. 007673	Operator Name Exxon Corporation	Elevation 3593 DF

Surface Location

UL or lot no. H	Section 10	Township 21-S	Range 36-E	Lot Idn	Feet from the 1650'	North/South line NORTH	Feet from the 990'	East/West line EAST	County LEA
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Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres 320					Joint or Infill	Consolidation Code	Order No.		

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNITL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	<p>OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p>6/12/95 <i>C.H. Harper</i> Signature C.H. Harper Printed Name Permits Supervisor Title Date</p> <p>SURVEYOR CERTIFICATION</p> <p>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 belief.</p> <p>5/9/79 Date of Survey Signature and Seal of Professional Surveyor.</p> <p>Certificate Number</p>
--	--

Distance to nearest Town 6.6 Miles NW of EUNICE New Mexico	Drawn By S.R. Patterson	Date 6/2/95	Drawing File Name C.F. File No. A10942
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