

EXXON COMPANY, U.S.A.

POST OFFICE BOX 1600 • MIDLAND, TEXAS 79702-1600

NEW MEXICO OIL CONSERVATION DIVISION

ALBUQUERQUE, NM

MAY 17 1994 8 50

PRODUCTION DEPARTMENT
SOUTHWESTERN DIVISION

ENVIRONMENTAL AND REGULATORY AFFAIRS

May 17, 1994

Non-Standard Gas Proration Unit
Simultaneous Dedication
Unorthodox Locations
Eumont Yates Seven Rivers Queen (Pro Gas)
Eumont Gas Com 2
Wells #1, 2, and 3
Section 29, T21S, R36E

Mr. William J. Le May
New Mexico Oil Conservation Division
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Dear Mr. Le May:

Exxon Corporation is requesting administrative approval of a 200 acre, Non-Standard Gas Proration Unit and Simultaneous Dedication for the Eumont Gas Com 2 Wells #1, 2, and 3 in the Eumont Yates Seven Rivers Queen (Pro Gas) Pool. This 200 acre Non-Standard Gas Proration Unit will consist of Unit letters I, J, K, L, and N.

A 160 acre Non-Standard Gas Proration Unit (Unit Letters I, J, K, and L) was previously approved for wells #1 and 2 (NSP-1688). A workover on #3 caused it to go from an oil well to a gas well, therefore, administrative approval is being requested for a 200 acre Non-Standard Gas Proration Unit, Simultaneous Dedication and Unorthodox locations for #1 and #3.

Enclosed is a copy of the cover letter, C-102 and C-103, that were sent to the Offset Operators and the District Office for each well. Also enclosed is a copy of the certified receipts. If you have any questions, please call me at (915) 6788-6782.

Sincerely,



Alex M. Correa
Senior Regulatory Specialist

AMC:mym
Enclosures
5\msgpu.ltr

Certified Mail Receipt No. P 322 579 804

A DIVISION OF EXXON CORPORATION



OFFSET OPERATORS
Exxon Corp.
Eumont Gas Com 2
Wells #1 and #2 and #3
Section 29, T 21S-R 36E
Lea County, New Mexico

ARCO Oil & Gas Company
P. O. Box 2819
Dallas, TX 75231
ATTN: Land Department

C. E. Long
P. O. Box 1943
Midland, TX 79702-1943

Conoco, Inc.
P. O. Box 4783
Houston, TX 77002
ATTN: Land Department

John H Hendrix Corporation
223 W. Wall, Suite 525
Midland, TX 79701

Lewis B. Burleson &
wife Kathryn K. Burleson
P. O. Box 2479
Midland, TX 79702

MKA Oil Properties
C/O Michael L. Klein
505 Midland National Bank Tower
Midland, TX 79701

Meridian Oil Inc.
P. O. Box 51810
Midland, TX 79710
ATTN: Land Department

Oxy USA Incorporated
P. O. Box 50250
Midland, TX 79705
ATTN: Land Department

Shell Western E & P Inc.
P. O. Box 576
Houston, TX 77001
ATTN: Land Department

Texaco, Inc.
P. O. Box 3109
Midland, TX 79702
ATTN: Land Department

Exxon Corp.
P. O. Box 1600, ML 14
Midland, TX 79702
ATTN: C. H. Harper

- 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):

1. Addressee's Address

2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
 Conoco, Inc.
 P.O. Box 4783
 Houston, TX 77002
 Attn: Land Dept.

4a. Article Number
P 322 579 794

4b. Service Type
 Registered
 Certified
 Express Mail

7. Date of Delivery
MAY 2 1994

8. Addressee's Address (Only if requested and fee is paid)
 Insured
 COD
 Return Receipt for Merchandise

5. Signature (Addressee)

6. Signature (Agent)

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530

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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 - 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):

1. Addressee's Address

2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
 Exxon Corp.
 P.O. Box 1600, ML-14
 Midland, TX 79702

4a. Article Number
P 322 579 802

4b. Service Type
 Registered
 Certified
 Express Mail

7. Date of Delivery
MAY - 2 1994

8. Addressee's Address (Only if requested and fee is paid)
 Insured
 COD
 Return Receipt for Merchandise

5. Signature (Addressee)

6. Signature (Agent)

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530

DOMESTIC RETURN RECEIPT

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

1. Addressee's Address

2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
 ARCO Oil & Gas Company
 P.O. Box 2819
 Dallas, TX 75223
 ATTN: Land Department

4a. Article Number
P 322 579 792

4b. Service Type
 Registered
 Certified
 Express Mail

7. Date of Delivery
MAY 2 1994

8. Addressee's Address (Only if requested and fee is paid)
 Insured
 COD
 Return Receipt for Merchandise

5. Signature (Addressee)

6. Signature (Agent)

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530

DOMESTIC RETURN RECEIPT

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 - 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):

1. Addressee's Address

2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
 Lewis B. Burlison &
 wife Kathryn K. Burlison
 P.O. Box 2479
 Midland, TX 79702

4a. Article Number
P 322 579 796

4b. Service Type
 Registered
 Certified
 Express Mail

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)
 Insured
 COD
 Return Receipt for Merchandise

5. Signature (Addressee)

6. Signature (Agent)

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530

DOMESTIC RETURN RECEIPT

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Is your RETURN ADDRESS completed on the reverse side?

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- 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:
MKA 011 Properties
C/O Michael L. Klein
505 Midland National Bank Tower
Midland, TX 79701

5. Signature (Addressee)
Michael Klein

4a. Article Number
P 322 579 797

4b. Service Type
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
5/2/94

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

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530 **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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- 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:
Meridian 011 Inc.
P.O. Box 51810
Midland, TX 79710
Attn: Land Dept.

5. Signature (Addressee)

4a. Article Number
P 322 579 798

4b. Service Type
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
5-2

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

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

SENDER:

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- 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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- 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:
John H. Hendrix Corporation
223 W. Wall, Suite 525
Midland, TX 79701

5. Signature (Addressee)
John Hendrix

4a. Article Number
P 322 579 795

4b. Service Type
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
5/2/94

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

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530 **DOMESTIC RETURN RECEIPT**

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- 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:
C. E. Long
P.O. Box 1943
Midland, TX 79702-1943

5. Signature (Addressee)
C. E. Long

4a. Article Number
P 322 579 793

4b. Service Type
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
MAY - 2 1994

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

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

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Is your RETURN ADDRESS completed on the reverse side?

6. Signature (Agent) <i>Henry Hoyer</i>	
5. Signature (Addressee)	
8. Addressee's Address (Only if requested and fee is paid)	
7. Date of Delivery MAY - 2 1994	
4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input checked="" type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise	
4a. Article Number P 322 579 801	
3. Article Addressed to: Texaco, Inc. P.O. Box 3109 Midland, TX 79705 Attn: Land Dept	

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

Is your RETURN ADDRESS completed on the reverse side?

6. Signature (Agent) <i>V. Anderson</i>	
5. Signature (Addressee)	
8. Addressee's Address (Only if requested and fee is paid)	
7. Date of Delivery	
4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise	
4a. Article Number P 322 579 799	
3. Article Addressed to: Oxy USA Incorporated Attn: Land Dept. P.O. Box 50250 Midland, TX 79705	

PS Form 3811, December 1991 * U.S.G.P.O.: 1992-307-530

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
 Complete items 1 and/or 2 for additional services.
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I also wish to receive the following services (for an extra fee):
 1. Addressee's Address
 2. Restricted Delivery
 Consult postmaster for fee.

Is your RETURN ADDRESS completed on the reverse side?

6. Signature (Agent) <i>Robert P. ...</i>	
5. Signature (Addressee)	
8. Addressee's Address (Only if requested and fee is paid)	
7. Date of Delivery MAY - 3 1994	
4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise	
4a. Article Number P 322 579 800	
3. Article Addressed to: Shell Western Exp Inc. P.O. Box 576 Houston, TX 77001 Attn: Land Dept.	

PS Form 3811, December 1991 * U.S.G.P.O.: 1992-307-530

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

Thank you for using Return Receipt Service.

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

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

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

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

WELL API NO.
3002504823

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.
B-935

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.)

7. Lease Name or Unit Agreement Name
EUMONT GAS COM 2

1. Type of Well:
OIL WELL GAS WELL OTHER

8. Well No.
1

2. Name of Operator
EXXON CORPORATION

9. Pool name or Wildcat
EUMONT YATES 7 RVRS QN (PRO GAS)

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

4. Well Location
Unit Letter **I** : **1980** Feet From The **SOUTH** Line and **660** Feet From The **EAST** Line
Section **29** Township **21S** Range **36E** NMPM **LEA** County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3637 GR

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK PLUG AND ABANDON
TEMPORARILY ABANDON CHANGE PLANS
PULL OR ALTER CASING
OTHER: **EXPAND PRORATION UNIT/SIMO DED**

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.

AUTHORIZATION IS REQUESTED TO EXPAND THE PRESENT NON-STANDARD GAS PRORATION UNIT IN THE EUMONT YATES 7 RVRS QN (PRO GAS) POOL FROM 160 ACS TO 200 ACS. THE NEW 200 AC PRORATION UNIT WILL BE UNIT LETTERS I, J, K, L AND N. THIS EXPANSION WILL INCLUDED THE 40 ACS. ASSIGNED TO THE NM B ST #10 THAT IS NOW A GAS WELL AFTER PERFS. WERE ADDED. APPROVAL FOR THE EXISTING 160 AC. NON-STANDARD GAS PRORATION UNIT WAS GRANTED BY ADM. ORDER NSP-1688. CONVERTING THE NM B ST. #10 TO A GAS WELL WILL REQUIRE THE NAME TO BE CHANGED TO THE EUMONT GAS COM 2 WELL #3.

**ADMINISTRATIVE APPROVAL IS ALSO BEING REQUESTED FOR SIMULTANEOUS DECICATION OF WELL #'S 1, 2 AND 3.
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 04/26/94

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:

OIL CONSERVATION DIVISION

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

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

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

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

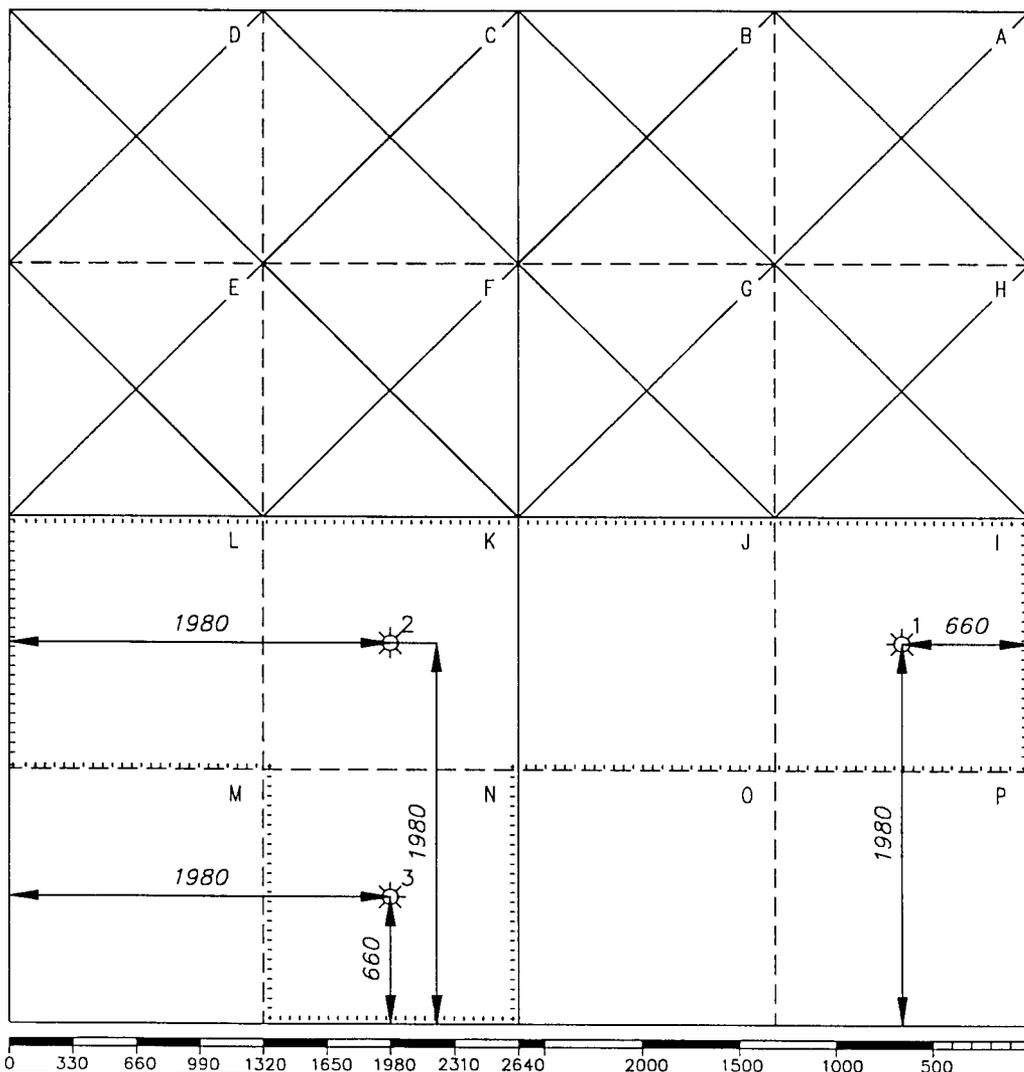
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

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

Operator Exxon Corporation			Lease EUMONT GAS COM 2		Well No. 1
Unit Letter I	Section 29	Township 21	Range 36	County NMPM LEA	
Actual Footage Location of Well: 1980 feet from the SOUTH line and 660 feet from the EAST line.					
Ground level Elev. 3637 DF	Producing Formation YATES 7 RIVERS QN		Pool EUMONT YATES 7 RVRS QN (PRO GAS)		Dedicated Acreage: 200 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
C.H. Harper

Printed Name
C.H. HARPER

Position
PERMITS SUPERVISOR

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

Date
4/26/94

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
12/9/35

Signature & Seal of
Professional Surveyor

Certificate No.

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. 3002504825
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-935
7. Lease Name or Unit Agreement Name EUMONT GAS COM 2
8. Well No. 2
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 P. O. BOX 1600 MIDLAND, TX 79702
4. Well Location Unit Letter K : 1980 Feet From The SOUTH Line and 1980 Feet From The WEST Line Section 29 Township 21S Range 36E NMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3639 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: **EXPAND PRORATION UNIT/SIMO DED**

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.

AUTHORIZATION IS REQUESTED TO EXPAND THE PRESENT NON-STANDARD GAS PRORATION UNIT IN THE EUMONT YATES 7 RVRS QN (PRO GAS) POOL FROM 160 ACS TO 200 ACS. THE NEW 200 AC PRORATION UNIT WILL BE UNIT LETTES I, J, K, L AND N. THIS EXPANSION WILL INCLUDE THE 40 ACS. ASSIGNED TO THE NM B ST #10 THAT IS NOW A GAS WELL AFTER PERFS. WERE ADDED. APPROVAL FOR THE EXISTING 160 AC. NON-STANDARD GAS PRORATION UNIT WAS GRANTED BY ADM. ORDER NSP-1688. CONVERTING THE NM B ST. #10 TO A GAS WELL WILL REQUIRE THE NAME TO BE CHANGED TO THE EUMONT GAS COM 2 WELL # 3.

ADMINISTRATIVE APPROVAL IS ALSO BEING REQUESTED FOR SIMULTANEOUS DEDICATION OF WELL #'S 1, 2 AND 3. 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 04/26/94
 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:

OIL CONSERVATION DIVISION

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

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

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

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

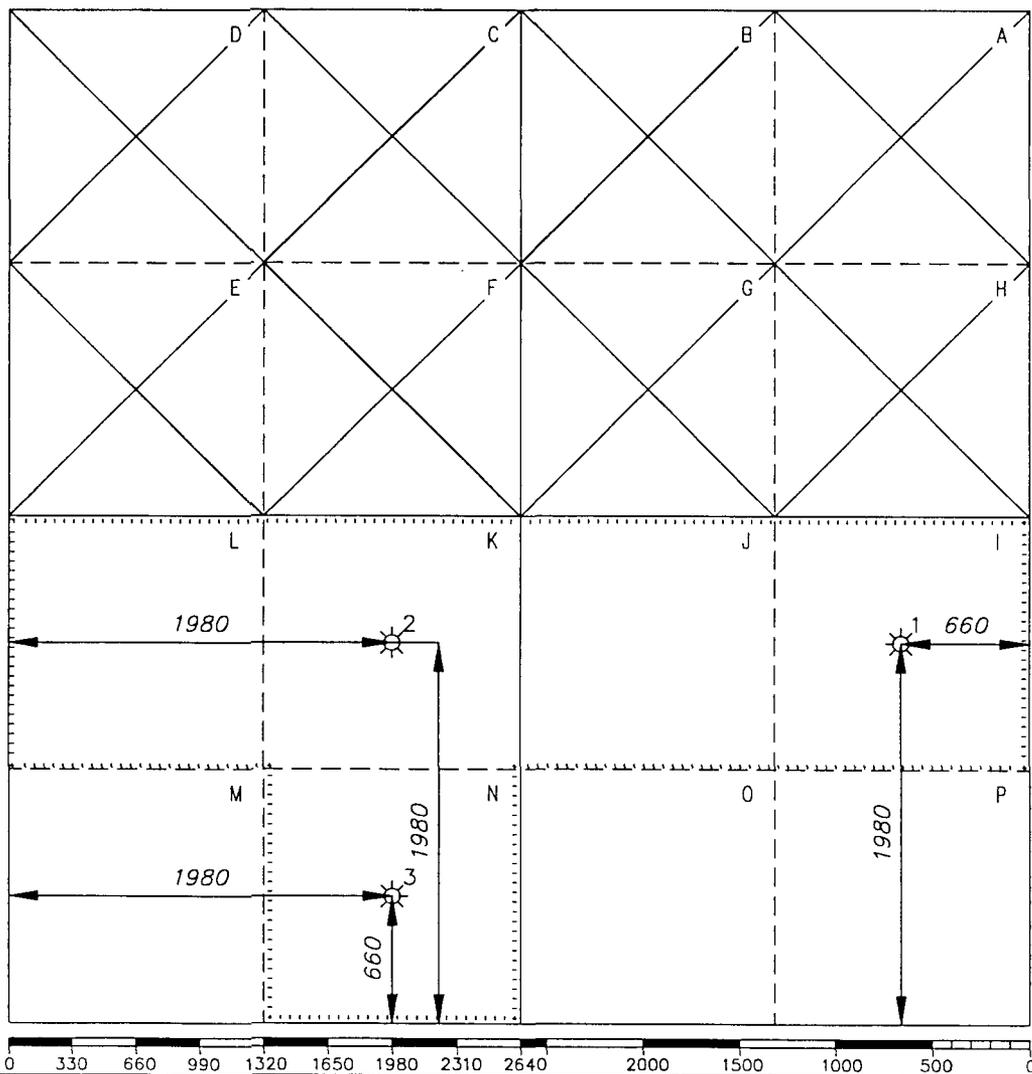
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

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

Operator Exxon Corporation			Lease EUMONT GAS COM 2		Well No. 2
Unit Letter K	Section 29	Township 21	Range 36	County NMPM LEA	
Actual Footage Location of Well: 1980 feet from the SOUTH line and 1980 feet from the WEST line.					
Ground level Elev. 3639 DF	Producing Formation YATES 7 RIVERS QN		Pool EUMONT YATES 7 RVRS QN (PRO GAS)		Dedicated Acreage: 200 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 C.H. Harper

Printed Name
C.H. HARPER

Position
PERMITS SUPERVISOR

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

Date
4/26/94

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 _____

Signature & Seal of Professional Surveyor _____

Certificate No. _____

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

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

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

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

WELL API NO. 3002504826
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B 935
7. Lease Name or Unit Agreement Name EUMONT GAS COM 2
8. Well No. 3
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 GAS WELL OTHER

2. Name of Operator
EXXON CORPORATION

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

4. Well Location
Unit Letter **N** : **660** Feet From The **SOUTH** Line and **1980** Feet From The **WEST** Line
Section **29** Township **21S** Range **36E** NMPM **LEA** County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3620 GR

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

- PERFORM REMEDIAL WORK PLUG AND ABANDON
- TEMPORARILY ABANDON CHANGE PLANS
- PULL OR ALTER CASING
- OTHER: CONVERT TO GAS WELL/SIMO DED.

- 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.

ADDING PERFS. CAUSED THIS WELL TO GO FROM AN OIL WELL TO A GAS WELL. THEREFORE, THE WELL NAME HAS BEEN CHANGED FROM THE NM B ST. #10 TO THE EUMONT GAS COM 2 #3. AUTHORIZATION IS REQUESTED TO SIMULTANEOUSLY DEDICATE WITH #'S 1 & 2 . AUTHORIZATION IS ALSO REQUESTED FOR AN UNORTHODOX LOCATION FOR THE # 3 AND A 200 AC. NON-STANDARD GAS PRORATION UNIT COMPROSED OF UNIT LETTERS I, J, K, L AND N IN THE EUMONT YATES 7 RVRS QN (PRO GAS) POOL.

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 04/26/94
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:

OIL CONSERVATION DIVISION

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

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

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

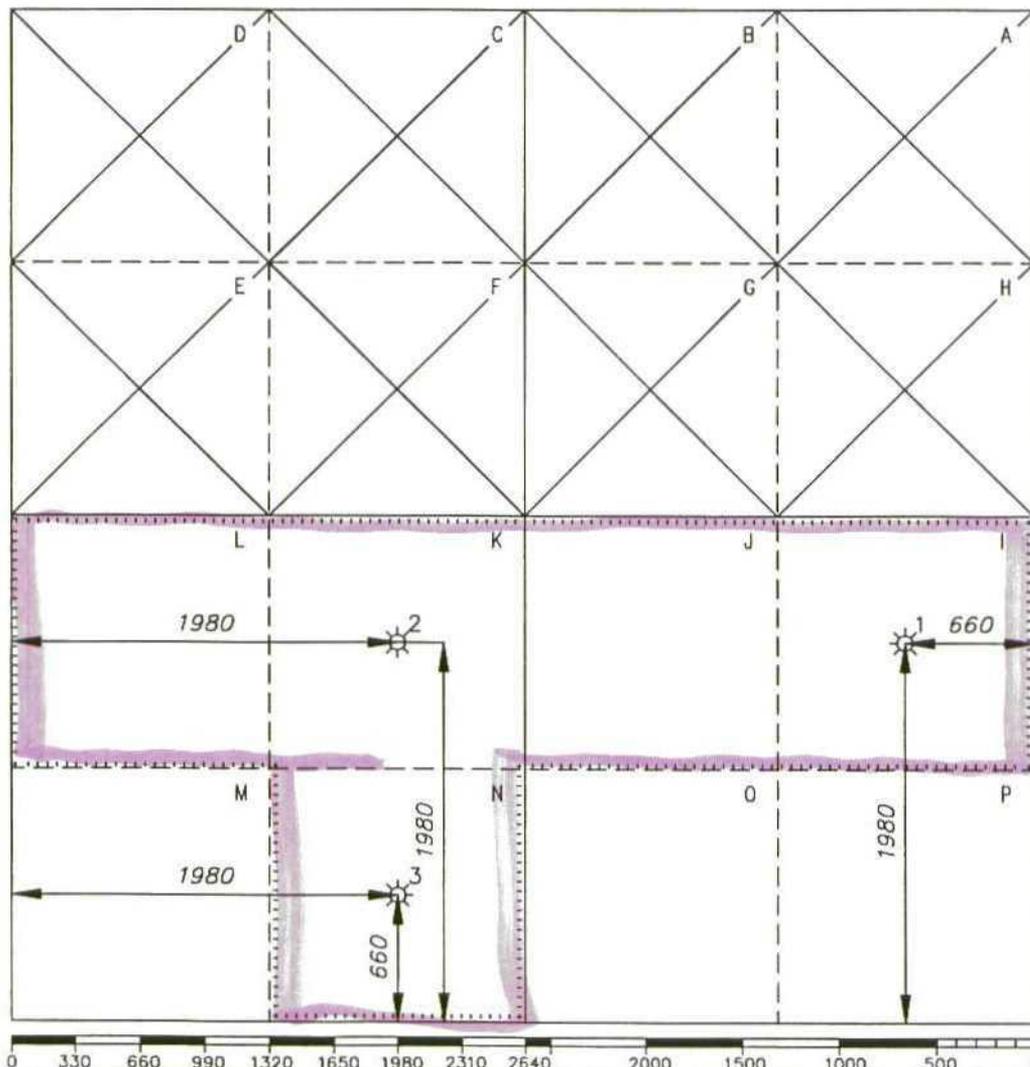
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Operator Exxon Corporation			Lease EUMONT GAS COM 2			Well No. 3		
Unit Letter N	Section 29	Township 21	Range 36	County NMPM		LEA		
Actual Footage Location of Well: 660 feet from the SOUTH line and 1980 feet from the WEST line.								
Ground level Elev. -		Producing Formation YATES 7 RIVERS QN		Pool EUMONT YATES 7 RVRS QN (PRO GAS)			Dedicated Acreage: 200 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: C.H. Harper
 Printed Name: C.H. HARPER
 Position: PERMITS SUPERVISOR
 Company: Exxon Corporation
 P.O. Box 1600-Midland, Tx.-79702
 Date: 4/26/94

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: _____
 Signature & Seal of Professional Surveyor: _____
 Certificate No.: _____

EXXON COMPANY, U.S.A.

POST OFFICE BOX 1600 • MIDLAND, TEXAS 79702-1600

PRODUCTION DEPARTMENT
SOUTHWESTERN DIVISION

ENVIRONMENTAL AND REGULATORY AFFAIRS

April 26, 1994

Non-Standard Gas Proration Unit
Simultaneous Dedication
Unorthodox Locations
Eumont Yates Seven Rivers Queen (Pro Gas)
Wells #1, 2 and 3
Section 29, T21S-R36E
Lea County, New Mexico

Offset Operators

Gentlemen:

Exxon Corporation is requesting administrative approval of a 200 acre, Non-Standard Gas Proration Unit and Simultaneous Dedication for the Eumont Gas Com 2 Wells #1, 2 and 3 in the Eumont Yates Seven Rivers Queen (Pro Gas) Pool. This 200 acre Non-Standard Gas Proration Unit will consist of Unit letters I, J, K, L and N.

A 160 acre Non-Standard Gas Proration Unit (Unit letters I, J, K and L) was previously approved for wells #1 and 2. A workover on #3 caused it to go from an oil well to a gas well, therefore, administrative approval is being requested for a 200 acre Non-Standard Gas Proration Unit, Simultaneous Dedication and Unorthodox locations for #1 and #3.

If you have no objections to the above referenced request, please sign and return one copy of the enclosed waiver to the NMOCD office in Santa Fe and one copy to me. Return envelopes and copies of associated documents are enclosed.

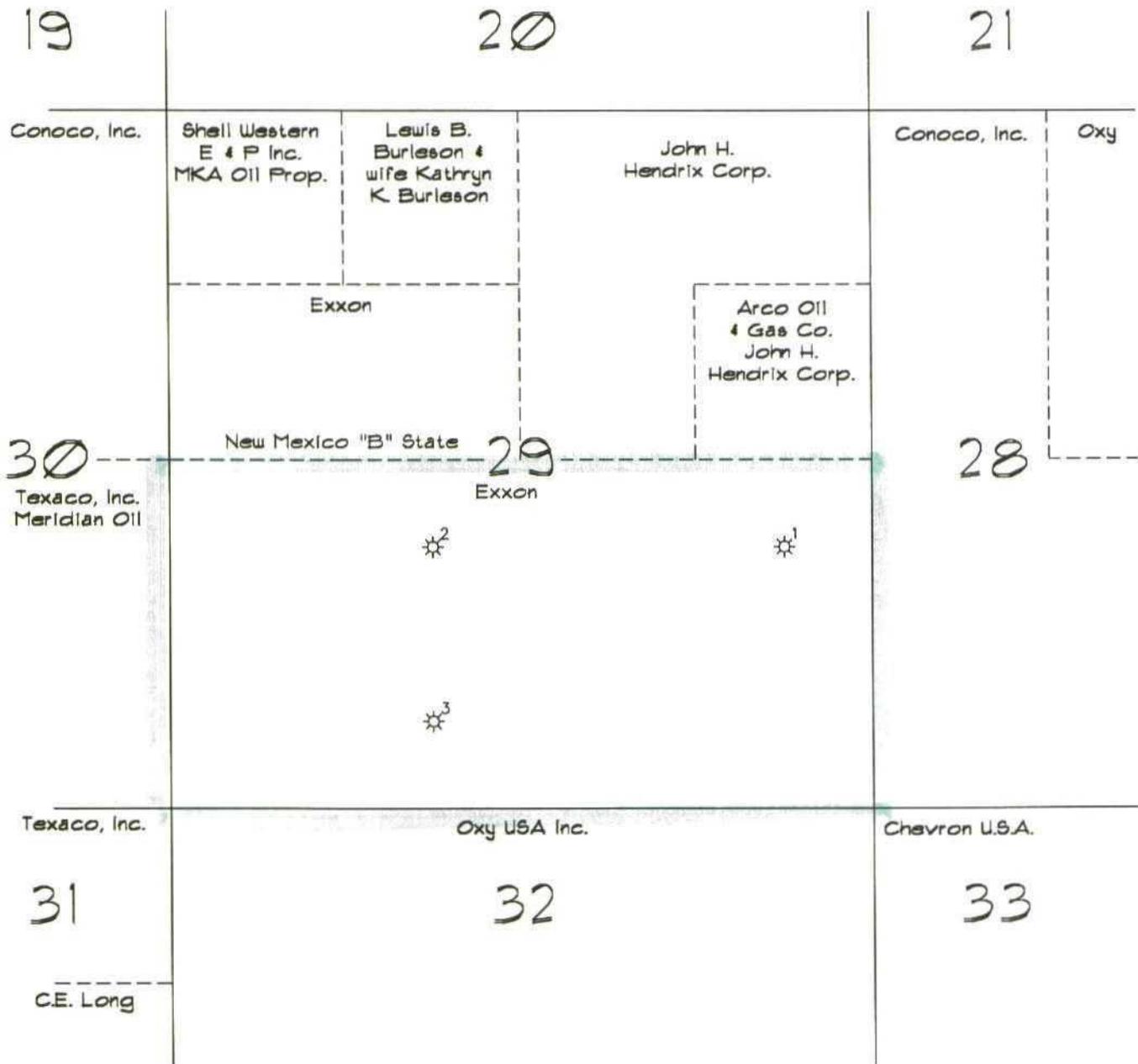
If you have any questions, please call me at (915) 688-6782.

Sincerely,



Alex M. Correa
Senior Regulatory Specialist

AMC:mym
4\nsgpu.ltr



Eumont Gas Unit Com 2
A01970A

WAIVER

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

This is to advise that the undersigned has been given due notice that Exxon Corp. has made application for a 200 acre Non-Standard Gas Proration Unit and Simultaneous Dedication for the Exxon Corp., Eumont Gas Com 2 wells #1, 2 and 3 in the Eumont Yates 7 Rivers Queen (Pro Gas) Pool. This 200 acre Non-Standard Gas Proration Unit will consist of unit letters I, J, K, L, and N, Section 29, T21S-R36E, Lea County, New Mexico. Also, application was made for Unorthodox locations for wells #1 and 3.

We, the undersigned, hereby waive any objection to the granting of this application for a Non-Standard Gas Proration Unit consisting of 200 acres, Simultaneous Dedication and Unorthodox Locations for the Exxon Corporation, Eumont Gas Com 2 wells #1, 2, and 3 in the Eumont Yates 7 Rivers Queen (Pro Gas) Pool. Well #1 is located 1980' FSL & 660' FEL, #2 is located 1980' FSL & 1980' FWL and #3 is 660' FSL and 1980' FWL. These wells are in Section 29, T21S-R36E, Lea County, New Mexico.

Executed this ____ day of _____, 1994.

Company: _____

By: _____

WAIVER

MAY 05 1994
NGPA Permits

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

This is to advise that the undersigned has been given due notice that Exxon Corp. has made application for a 200 acre Non-Standard Gas Proration Unit and Simultaneous Dedication for the Exxon Corp., Eumont Gas Com 2 wells #1, 2 and 3 in the Eumont Yates 7 Rivers Queen (Pro Gas) Pool. This 200 acre Non-Standard Gas Proration Unit will consist of unit letters I, J, K, L, and N, Section 29, T21S-R36E, Lea County, New Mexico. Also, application was made for Unorthodox locations for wells #1 and 3.

We, the undersigned, hereby waive any objection to the granting of this application for a Non-Standard Gas Proration Unit consisting of 200 acres, Simultaneous Dedication and Unorthodox Locations for the Exxon Corporation, Eumont Gas Com 2 wells #1, 2, and 3 in the Eumont Yates 7 Rivers Queen (Pro Gas) Pool. Well #1 is located 1980' FSL & 660' FEL, #2 is located 1980' FSL & 1980' FWL and #3 is 660' FSL and 1980' FWL. These wells are in Section 29, T21S-R36E, Lea County, New Mexico.

Executed this 4 day of May, 1994.

Company: John H. Hendrix Corp.
By: Lennie H. Wathen

WAIVER

MAY 05 1994
NGPA Permits

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

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We, the undersigned, hereby waive any objection to the granting of this application for a Non-Standard Gas Proration Unit consisting of 200 acres, Simultaneous Dedication and Unorthodox Locations for the Exxon Corporation, Eumont Gas Com 2 wells #1, 2, and 3 in the Eumont Yates 7 Rivers Queen (Pro Gas) Pool. Well #1 is located 1980' FSL & 660' FEL, #2 is located 1980' FSL & 1980' FWL and #3 is 660' FSL and 1980' FWL. These wells are in Section 29, T21S-R36E, Lea County, New Mexico.

Executed this 5 day of May, 1994.

Company: Lewis Berleson, Inc.

By: [Signature]