

**DISTRICT I**  
1625 N. French Dr., Hobbs, NM 88240  
**DISTRICT II**  
811 South First, Artesia NM 88210  
**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, NM 87410  
**DISTRICT IV**  
2040 South Pacheco, Sante Fe, NM 87505

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

WELL API NO.  
**30-015-24543**

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
**K-6584**

7. Lease Name or Unit Agreement Name  
**Avalon (Delaware) Unit**

8. Well No.  
**263**

9. Pool name or Wildcat  
**Avalon; Delaware 3715**

**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 ☒ Gas Well ☐ Other ☐

2. Name of Operator  
**Exxon Mobil Corporation**

3. Address of Operator **P.O. Box 4358**  
**Houston TX 77210-4358**

4. Well Location  
Unit Letter **P** : **480** Feet From The **South** Line and **990** Feet From The **East** Line  
Section **30** Township **20S** Range **28E** NMPH **Eddy** County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**3243' GR**

**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 ☐ MULTIPLE COMPLETION ☐  
OTHER: ☐

**SUBSEQUENT REPORT OF:**

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

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. (For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion)

**Current TA status expires 12/2004. Request TA status extension for 5 years. Pressure test chart dated 10-12-2004 is attached.**

Temporary Abandoned Status approved  
until **10-12-2007**

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

SIGNATURE *D. O. Howard* TITLE **Sr. Regulatory Specialist** DATE **11/01/2004**

TYPE OR PRINT NAME **Dolores O. Howard** TELEPHONE NO. **(281) 654-1929**

(This space for State Use)

APPROVED BY *[Signature]* TITLE *[Signature]* DATE **NOV 3 2004**

CONDITIONS OF APPROVAL IF ANY:

