

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised March 25, 1999

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, Santa Fe, NM 87505

OIL CONSERVATION DIVISION

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

WELL API NO. 30-015-24794
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NM-01119

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 ☐

RECEIVED

2. Name of Operator
Exxon Mobil Corporation

DEC - 8 2003

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

OCD-ARTESIA

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

8. Well No.
401

9. Pool name or Wildcat
Avalon; Delaware 3715

4. Well Location
Unit Letter **A** : **330** Feet From The **north** Line and **330** Feet From The **east** Line
Section **36** Township **20S** Range **27E** NMPH **Eddy** County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
3299 KB

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: ☐

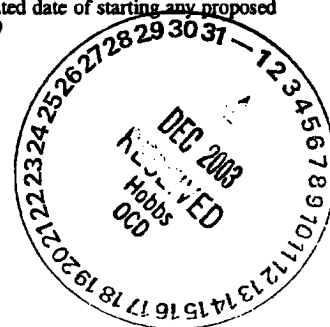
SUBSEQUENT REPORT OF:

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

OTHER: **Temporarily 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)

09/26/2003 - MIRU.
09/29/2003 - POOH w/ rods and pump.
09/30/2003 - Set CIBP @ 4480'. Dump 35' cmt on top.
10/01/2003 - RIH w/ kill string. ND BOP. Flange up wellhead. RDMO.



Remarks: Van Burton witnessed chart for TA. NMOCD has copy of chart on file.

Temporary Abandonment Status approved
Unit **10-9-06**

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

SIGNATURE *Jamie A. Robinson* TITLE **Staff Office Assistant**

DATE **11/26/2003**

TYPE OR PRINT NAME **Jamie A. Robinson**

TELEPHONE NO. **(281) 654-1948**

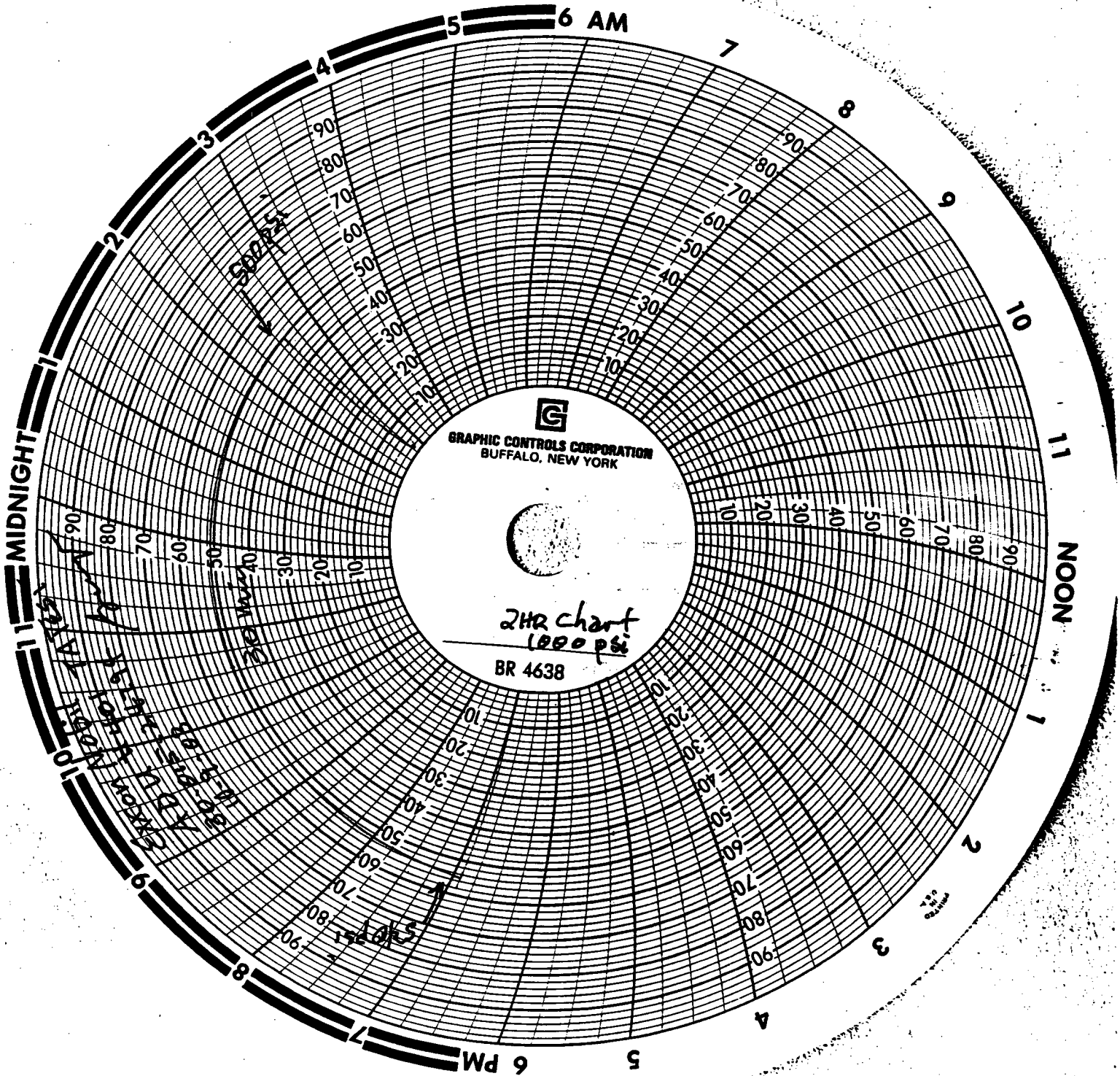
(This space for State Use)

APPROVED BY *[Signature]* TITLE *[Signature]* DATE _____

CONDITIONS OF APPROVAL IF ANY:

APPROVED DEC 10 2003

RECEIVED
DEC 10 2003
OCD-ARTESIA



C-103

ExxonMobil Production

T/A

U.S. West

Injection / Disposal Test Results

Russell / Seminole / New Mexico Areas

RECEIVED

DEC 10 2003

OCD-ARTESIA

(please print clearly)

1. Lease Name & Well Number: ADU #401
2. Date & Time Of Test: 10-9-03 at 2¹⁴ P.M
3. A. Was Test Witnessed by Agency Official: (Yes) or No
(Circle all below that pertain)
- B. If Yes Test Witnessed by: T.R.R.C. N.M.O.C.D. & / OR B.L.M.
- C. If Yes, Name of Rep(s): Gerry Guye

4. Test Pressure (psig): 540# TO 500# 30 mins

Time	Tubing	Production Casing	Intermediate Casing	Surface Casing
Initial				
15 Minutes				
30 Minutes		✓		

5. A. Packer Type: CAST Iron Bridge Plug
- B. Packer Setting Depth: 4480' with 35 feet of cement on top
(please circle one)
6. Has Injection Interval Changed AFTER Workover: Yes No
From: _____
To: _____
7. Reason For Test: (A)
(please circle on letter)
A. After Workover
B. First Test Prior to Injection (ie., conversion, drillwell)
C. Annual Permit Requires
D. 5 Year Test Required
E. Other: _____

8. Well Status: Active (please circle one) Shut-In T/A'd
9. Comments: test start at 2¹⁴ P.M first Didn't go
2nd test start at 3⁰⁰ P.M at 540# finish at 3³⁰ P.M 500#

10. Name of Person(s) Conducting Test: John A. Castilla-Gonzalez
(please print name)
John A. Castilla-Gonzalez
(signature of person(s) conducting test)

Attach **ORIGINAL PRESSURE RECORDING CHART** (with ExxonMobil's representatives signature) to this form. Please, send by regular mail, Fed Ex, or Airborne within one (1) week after test is completed to:

MARY DOW

Permitting Group, ExxonMobil Production U.S. West
P.O. Box 4358
Houston, Texas 77210-4358

or

ExxonMobil Production U.S. West
396 West Greens Road
Room #311

Houston, Texas 77067