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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease  
State ☒ Fee ☐

5. State Oil & Gas Lease No.

B-10456

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	<b>CHANGE OPERATOR NAME FROM HUMBLE OIL &amp; REFINING COMPANY TO EXXON CORPORATION EFFECTIVE JANUARY 1, 1973</b>		7. Unit Agreement Name Chalk Bluff Draw Unit
2. Name of Operator Humble Oil & Refining			8. Farm or Lease Name
3. Address of Operator Box 1600, Midland, Texas 79701			9. Well No. 14
4. Location of Well UNIT LETTER F 1650 FEET FROM THE North LINE AND 1650 FEET FROM THE West LINE, SECTION 16 TOWNSHIP 18-S RANGE 27-E NMPM.			10. Field and Pool, or Wildcat Empire also
15. Elevation (Show whether DF, RT, GR, etc.) 3498 DF		12. County Eddy	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

17. 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 placed on pump, August, 1966.

**CHANGE OPERATOR NAME FROM  
HUMBLE OIL & REFINING COMPANY  
TO EXXON CORPORATION  
EFFECTIVE JANUARY 1, 1973**

RECEIVED

AUG 25 1966

O. C. C.  
ARTESIA, OFFICE

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

SIGNED A. L. Clemmer TITLE Agent DATE 8-22-66

APPROVED BY M. L. Armstrong TITLE OIL AND GAS INSPECTOR DATE AUG 26 1966  
CONDITIONS OF APPROVAL, IF ANY: