Form 9-331 (May 1963)	UN. (ED STATE		SUBMIT IN TRIP.	on re-		reau No. 42-R1424.	
DEF	PARTMENT OF THE		R verse side)			ON AND SERIAL NO.	
GEOLOGICAL SURVEY					LC 069274  6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
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—" for such proposals.)					U. IF INDIAN, ADDOTTED OR TRIBE NAME		
î.					T AGREEMENT	NAME	
OIL GAS X OTHER					_		
2. NAME OF OPERATOR					8. FARM OR LEASE NAME		
Exxon Corporation   3. ADDRESS OF OPERATOR					Red Lake Fed. Com. 9. WELL NO.		
Box 1600, Midland, TX 79701					i		
A LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*					ELD AND POOL		
See also space 17 below.) At surface				1		nsylvanian Ga	
				11. 8	EC., T., R., M., C SURVEY OR AL	REA 27	
1,980' FSL a	nd 810 FWL			Sec	. 6, T-1	8-S, R <del>-3</del> 7-E	
14. PERMIT NO.	15. ELEVATIONS (Show	w whether DF, Ri Later	r, GR, etc.)	1	OUNTY OR PAR	New Mexico	
16. Ci	neck Appropriate Box To I	ndicate Nat	ure of Notice. Repo	ort, or Other [	)ata		
	OF INTENTION TO:	1	,	SUBSEQUENT RE			
r			WARR CUITAARE	X	REPAIRIN	G WELL	
TEST WATER SHUT-OFF	PULL OR ALTER CASING MULTIPLE COMPLETE		WATER SHUT-OFF FRACTURE TREATM			CABING	
FRACTURE TREAT SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDI	ZING	ABANDON	MENT*	
REPAIR WELL	CHANGE PLANS		(Other)	rt results of mul	tinla sompleti	on on Well	
(Other)  17. DESCRIBE PROPOSED OR COMP			Completion o	r Recompletion R	eport and Log	torm.)	
13-3/8", 48# 11-7-75, circ	2" hole <b>11-</b> 7-75. H-40 csg. set at 24	43'. Cmt . WOC Te	s. $w/240$ sx $C1a$ sted csg. $w/10$	ass 'C', Po	OB at 6:4	45 PM	
cmt. plug at	8:30 PM 11-8-75.	Drilling.				-	
						:	
	•				<u>-</u>	•	
					일. -	•	
		`	V F. D	^			
		REC	EIVED	~	ECEI C12197		
		•	4075		CEI		
		DEC	1 6 1975	$D_{\ell}$		EN	
				S. S.C.	1200	70	
		0	. C. C.	4RTES/A	0610.	5	
		ARTE	SIA, OFFICE	7,	VEW SHO	!•.	
					C 1 2 197 OGICAL SURV NEW MEXICO	EY	
18. I hereby certify that the f	oregoing is true and correct						
SIGNED	uplon.	TITLE	Unit Head		DATE	11-10-75	
(This space for Federal or	State office use)						
ARPROVED BY		TITLE			DATE		
CONDITIONS OF APPRO	VAL, IF ANY:						

\*See Instructions on Reverse Side