

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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SANTA FE	<input checked="" type="checkbox"/>
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U.S.G.S.	
LAND OFFICE	
OPERATOR	<input checked="" type="checkbox"/>

NOV 10 1982

O. C. D.

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
LG-3217, V-446

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Exxon Corporation	8. Farm or Lease Name Com. New Mexico "DE" State
3. Address of Operator P. O. Box 1600, Midland, Texas 79702	9. Well No. 1
4. Location of Well UNIT LETTER C 660 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 19 TOWNSHIP 19S RANGE 24E NMPM.	10. Field and Pool, or Whichever Undesignated Siegestrest Draw Morrow
15. Elevation (Show whether DF, RT, GR, etc.) GR 3805'	12. County Eddy

16. 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 ☐
OTHER ☐

SUBSEQUENT REPORT OF:

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

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
OTHER ☐

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 1703.

Drilled 7 7/8" hole to 8700' TD.
Ran 203 jts; 14, 15.5, 17#; 5 1/2 " Csg set at 8698'.
Cmt w/1550 sx Trinity Lite; wt. 12.77; Bumped plug at 2:45 p.m. 10-21-82. WOC
Top of CMT 2175' - Temp Survey
Test 5 1/2" cst w/1500 * 11-1-82 - HELD OK
Prepare to Perf.

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

SIGNED Leslie A. Clements TITLE Sr. Administrator DATE November 8, 1982

Original Signed By
Leslie A. Clements
APPROVED BY Supervisor District II TITLE DATE JAN - 5 1983
CONDITIONS OF APPROVAL, IF ANY: