

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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RECEIVED BY  
OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501  
JAN 30 1984  
O. C. D.  
ARTESIA, OFFICE

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
LG-1637	

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"/>	7. Unit Agreement Name
2. Name of Operator EXXON CORPORATION	8. Farm or Lease Name NEW MEXICO DC STATE
3. Address of Operator P.O. Box 1600, MIDLAND, TEXAS 79702	9. Well No. 2
4. Location of Well UNIT LETTER I 1780 FEET FROM THE SOUTH LINE AND 660 FEET FROM THE EAST LINE, SECTION 19S TOWNSHIP 19E RANGE 29E NMPM.	10. Field and Pool, or Whidcat EAST MILLMAN QUEEN GRAYBURG
15. Elevation (Show whether DF, RT, GR, etc.) GR 3359.3	12. County Eddy

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

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.

- PULL RODS & TUBING.
- RUN RETRIEVABLE BRIDGE PLUG AND PACKER.
- ACIDIZE PERFS 1956-2468 W/12,500 GAL DOWELL 15% NEHCL ACID.
- PLACE WELL ON PUMP.

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

SIGNED D. F. Lowe TITLE SR. ADMIN. DATE 1-26-84

APPROVED BY Mike Walker TITLE OIL AND GAS INSPECTOR DATE JAN 30 1984  
CONDITIONS OF APPROVAL, IF ANY: