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P. O. BOX 20
SANTA FE, NEW MEXICO 87501RECEIVED BY -
MAY 31 1984O. C. D.
ARTESIA, OFFICE

5A. Indicate Type of Lease

STATE ☒ FEE ☐

5. State Oil & Gas Lease No.

LG 1637

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. Type of Well

OIL WELL ☒GAS WELL ☐

OTHER

SINGLE ZONE ☐MULTIPLE ZONE ☐

2. Name of Operator

Exxon Corporation

3. Address of Operator

P. O. Box 1600, Midland, Texas 79702

4. Location of Well

UNIT LETTER J LOCATED 1980 FEET FROM THE South LINE

AND 1953 FEET FROM THE East LINE OF SEC. 18 TWP. 19S RGE. 29E N40W

7. Unit Agreement Name

8. Farm or Lease Name

New Mexico DC State

9. Well No.

5Y

10. Field and Pool, or Wildcat

Undesignated East
Millman Queen Grayburg

12. County

Eddy

19. Proposed Depth

2600'

19A. Formation

Grayburg & Queen

20. Rotary or C.T.

Rotary

21. Elevations (Show whether DF, KT, etc.)

3369' GR

21A. Kind & Status Plug. Bond

Blanket

21B. Drilling Contractor

Unknown

22. Approx. Date Work will start

May 4, 1984

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4"	8 5/8"	24#	350'	220	Surface
7 7/8"	5 1/2"	17#	2600'	500	Surface

Mud: 0-350' - FW Spud
350'- TD - Brine Water

BOP: 8 5/8" Type VIII/2000 PSI

Diagrammatic sketch and specifications of BOP are attached.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 12-1-84
UNLESS DRILLING UNDERWAY

N ABOVE SPACE DESCRIBE PROPOSED PROGRAM; IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

Signed Melba Kripleng Title Unit Head Date 5-3-84
(This space for State Use)APPROVED BY Mr. Wilman TITLE OIL AND GAS INSPECTOR
CONDITIONS OF APPROVAL, IF ANY:DATE MAY 31 1984Post. A P 2
PD-121 KB
6-8-84

State Lse. No. _____

WELL LOCATION AND ACREAGE DEDICATION PLAT

Supersedes C-128
Effective 1-4-65

Federal Lse. No. _____

All distances must be from the outer boundaries of the Section.

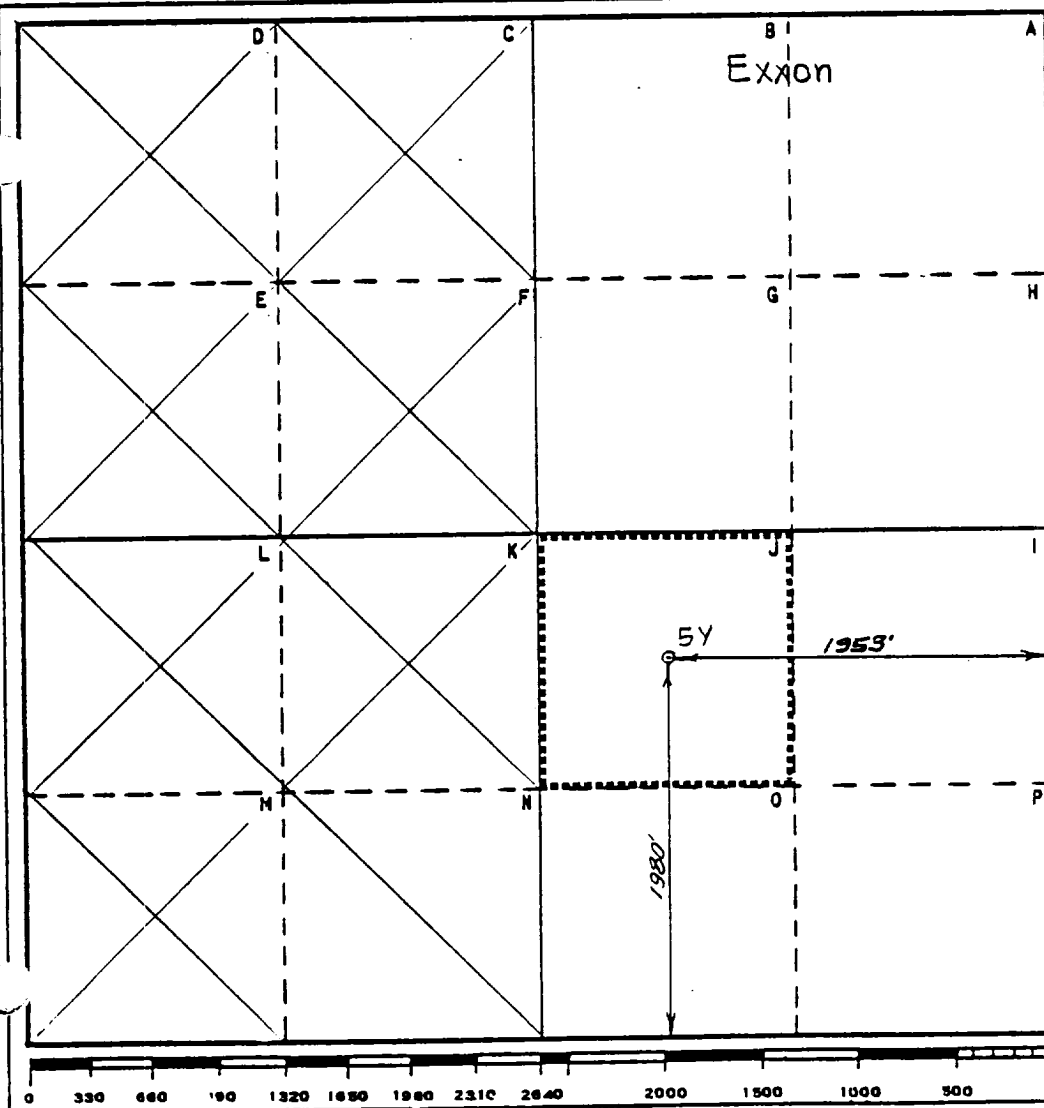
Operator Exxon Corporation			Lease New Mexico "DC" State		Well No. 5Y
Well Letter J	Section 18	Township 19 S	Range 29 E	County Eddy	
Actual Footage Location of Well: 1980 feet from the South line and 1953 feet from the East line					
Ground Level Elev: 3369	Producing Formation Queen-Grayburg		Pool East Millman-Queen-Grayburg		Dedicated Acreage: 40 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

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

Name
Melba Knippling

Position
UNIT HEAD

Company **Exxon Corporation**
Box 1600 Midland, Texas

Date
5-3-84

I hereby certify that the well location shown on this plat was plotted from field notes, actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
5-3-84

Registered Professional Engineer
and/or Land Surveyor

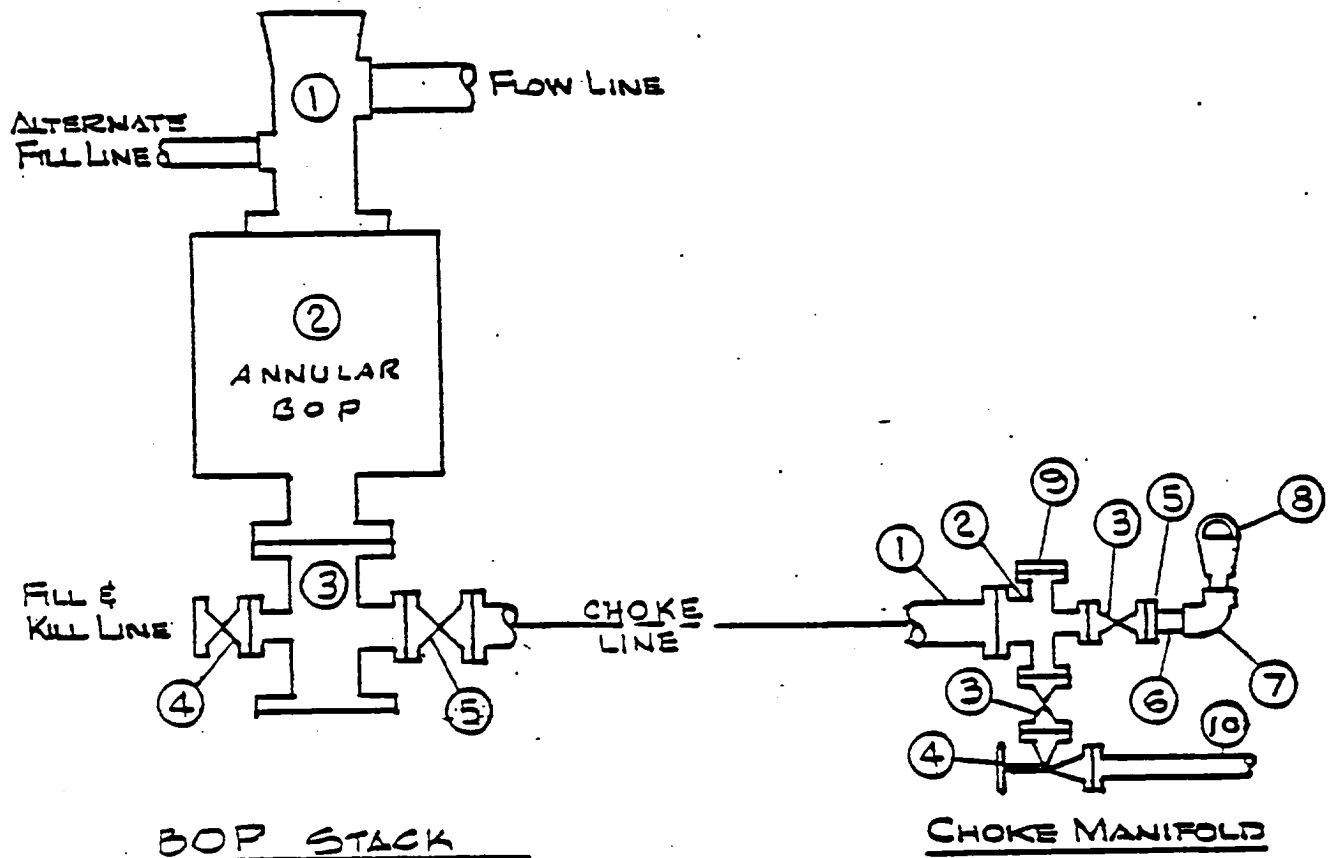
W. F. Hubbard
Certificate No.
6157

17.5 Miles **NE** of **Carlsbad**, New Mexico

C.E. Sec. File No. **A-7506-D1**

BLOWOUT PREVENTER SPECIFICATION TYPE VIII

2000 PSI



BOP STACK

1. Bell Nipple with flow line and fill connection.
2. Hydril or Shaffer bag type preventer.
3. Flanged spool with one 4-inch and one 2-inch (minimum) outlet.
4. 2-inch (minimum) flanged plug or gate valve.
5. 4-inch flanged pressure operated gate valve or manual operated plug or gate valve.

CHOKER MANIFOLD

1. 4-inch flanged spacer spool.
2. 4-inch X 2-inch X 2-inch X 2-inch flanged cross.
3. 2-inch flanged plug or gate valve.
4. 2-inch flanged adjustable choke.
5. 2-inch threaded flange.
6. 2-inch X H nipple.
7. 2-inch forged steel Ell.
8. Cameron (or equal) threaded pressure gage.
9. Blind flange.
10. 2-1/2-inch pipe, 300' to pit, anchored.