

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
NM OIL COM. SUBMIT IN TRICATE  
(Other instruc verse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

458

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED BY

(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.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	RECEIVED BY OCT 18 1985	5. LEASE DESIGNATION AND SERIAL NO. NM-26057
2. NAME OF OPERATOR Exxon Corporation Attn: Melba Knipling	O. C. D. ARTESIA OFFICE	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1600, Midland, Texas 79702		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL and 1980' FWL of Sec. 12 (SE NW)		8. FARM OR LEASE NAME Altwein Federal Com.
14. PERMIT NO.	15. ELEVATIONS (Show whether OF, ST, CL, etc.) 3866' GR	9. WELL NO. 1
		10. FIELD AND POOL, OR WILDCAT Antelope Sink - Cisco
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12-T19S-R23E
		12. COUNTY OR PARISH Eddy
		13. STATE New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Change proration unit	X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) _____	

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) \*

Please change the proration unit for subject well to the N/2 of Sec. 12 from what was originally submitted being the W/2 of Sec. 12. This change is requested in order to drill the Altwein "B" Federal Com. #1 located in the SW of Sec. 12. This was verbally approved by Mr. Wayne Melton today.



18. I hereby certify that the foregoing is true and correct  
SIGNED Melba Knipling TITLE Unit Head DATE Sept. 13, 1985  
This space for Federal or State office use)  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL IF ANY: \_\_\_\_\_

ACCOUNTED FOR RECORD  
pvc

OCT 17 1985

\*See Instructions on Reverse Side

Exxon Lse. No. \_\_\_\_\_ NEW MEXICO OIL CONSERVATION COMMISSION  
State Lse. No. \_\_\_\_\_ WELL LOCATION AND ACREAGE DEDICATION PLAT  
Federal Lse. No. \_\_\_\_\_ All distances must be from the outer boundaries of the Section.

Form C-102  
Supersedes C-128  
Effective 1-4-65

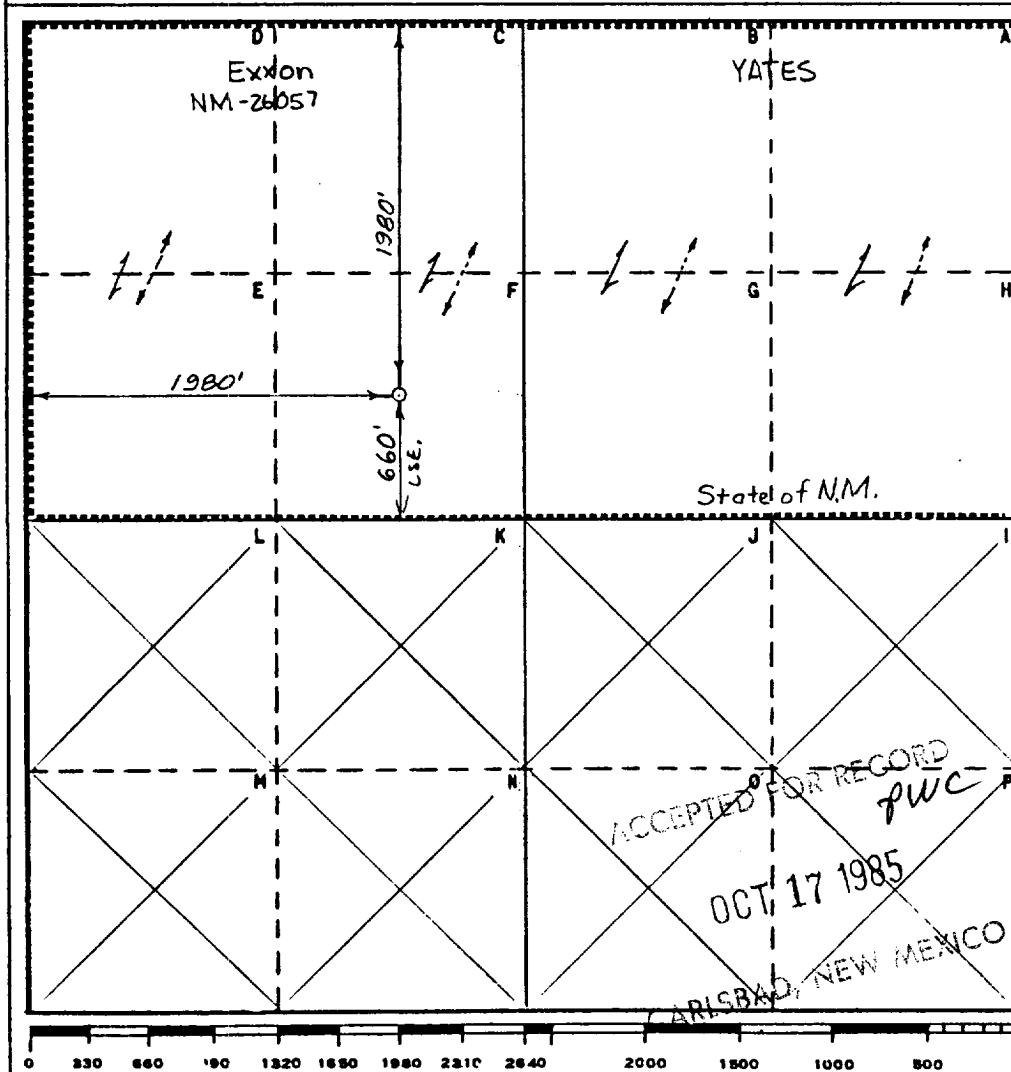
Operator <b>Exxon Corporation</b>			Lease <b>ALTWEIN FEDERAL COM.</b>		Well No. <b>1</b>
Unit Letter <b>F</b>	Section <b>12</b>	Township <b>19 S</b>	Range <b>23 E</b>	County <b>EDDY</b>	
Actual Footage Location of Well: <b>1980</b> feet from the <b>NORTH</b> line and <b>1980</b> feet from the <b>WEST</b> line					
Ground Level Elev: <b>3866</b>	Producing Formation <b>MORROW</b>		Pool <b>UNDESIG. ANTELOPE SINK</b>		Dedicated Acreage: <b>320</b> Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure 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 Communitization Pending

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  
Bruce R. Pennell  
Position  
**UNIT HEAD**  
Company  
**Exxon Corporation**  
**Box 1600 Midland, Texas**  
Date  
9-13-85

I hereby certify that the well location shown on this plat was plotted from field notes of 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  
**12-18-84**  
Registered Professional Engineer and/or Land Surveyor  
Bruce R. Pennell  
Certificate No.  
**9062**

10.5 Miles SE. of Hope, New Mexico

C.E. Sec. File No. WA-9742