Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

OIL CONS. COMMISSION
Drawer DD
Artesia, NM 88210

RECEIVED BY
SEP 04 1984
O. C. D.
ARTESIA, OFFICE

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☑ gas well ☐ other

2. NAME OF OPERATOR
EXXON CORPORATION

3. ADDRESS OF OPERATOR
P.O. BOX 1600, MIDLAND, TEXAS 79702

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FNL AND 1980' FEL OF SEC
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
NM-01119

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
YATES C FEDERAL

9. WELL NO.
3

10. FIELD OR WILDCAT NAME
AVALON DELAWARE

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC 31, T-20-S, R-28-E

12. COUNTY OR PARISH
EDDY

13. STATE
NEW MEXICO

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3245 GR

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐		☐
FRACTURE TREAT	☐		☐
SHOOT OR ACIDIZE	☐		☐
REPAIR WELL	☐		☐
PULL OR ALTER CASING	☐		☐
MULTIPLE COMPLETE	☐		☐
CHANGE ZONES	☐		☐
ABANDON*	☐	X	☐
(other) PLUG BACK AND COMP			

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

1. PULL PRODUCTION EQUIPMENT. SET CIBP AT 3350' W/30' CMT ON TOP OF CIBP.
2. PERF 5½" CSG 2546-2572, 2600-2626 W/TOTAL OF 54 SHOTS.
3. ACIDIZE W/4000 GAL 15% HCL ACID.
4. FRAC PERF 2546-2626 W/64000 GAL OF 75 QUALITY FOAM PLUS 36,000# 20/40 SAND PLUS 32,000# 10-20 SAND.
5. PENDING PRODUCTION RESULTS - ALL PRODUCTION PERF MAY BE OPENED.

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ROSWELL, NEW MEXICO

* Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED D. G. Love TITLE SR ADMIN DATE 3-22-84

(This space for Federal or State office use)

APPROVED BY Mark Hollis Acting AREA MANAGER TITLE CARLSBAD RESOURCE AREA DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side