

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division

311 S. 1st  
Albuquerque, NM 87102-2834

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: September 30, 1990

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT--" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☐ Gas Well ☐ Other

WATER SOURCE WELL

2. Name of Operator

EXXON CORPORATION ATTN: REGULATORY AFFAIRS

3. Address and Telephone No.

P. O. BOX 4358 HOUSTON, TX 77210 (915) 688-6166

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1557' FNL & 660' FWL, SEC. 4, T21S, R27E

5. Lease Designation and Serial No.

NM-01119

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

YATES C FEDERAL  
22

9. API Well No.

3001524501

10. Field and Pool, or Exploratory Area

AVALON DELAWARE

11. County or Parish, State

EDDY

NM

12. CHECK APPROPRIATE BOX(es) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other

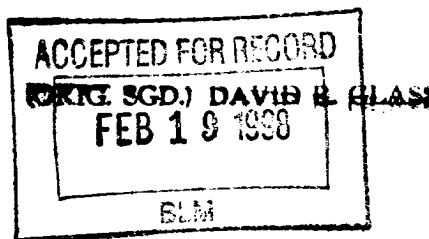
- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection

CONVERT TO WATER SOURCE WELL

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

13. 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.)\*

10/16/97 MIRU TEST WELL  
10/17/97 DO CMT FROM 3883' TO CIBP @ 3925'  
10/20/97 DRILL OUT CIBP @ 3925' AND CLEAN OUT HOLE TO 4368'  
10/21/97 ACIDIZE W/ 2000 GALS 15% HCL PERFS FROM 3250' 50 4306'  
10/22/97 RIH W/ TUBING FLANGE UP WELL HEAD OPEN WELL TO FLOW LINE  
THIS WELL IS NOW A WATER SOURCE WELL



Port ID-3  
1-26-98  
WILW #6  
Water Source well

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

Signed

Sharon B. Timlin

Sharon B. Timlin  
Title Sr. Staff Office Assistant

Date 01/29/98

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: