

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division  
811 S. 1st Street  
Artesia, NM 88210

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

CISF

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 (713) 431-1024**

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(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other	

**SENDING CASING INTEGRITY TEST**  
(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.)

ATTACHED AS A FOLLOW-UP TO OUR APPROVED REQUEST TO TA THE ABOVE WELL, IS THE CASING INTEGRITY TEST. PLEASE ACCEPT IT FOR RECORD.

THE SUNDRY NOTICE FOR THIS WORK WAS APPROVED ON JUNE 23, 1999 BY MR. DAVID GLASS.

TA APPROVED 12  
JUL 01 2000



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

Signed

*[Signature]*

**J. R. Ward**  
Title **Sr. Regulatory Specialist**

Date **07/08/99**

(This space for Federal or State office use)

Approved by **(ORIG. SGD.) DAVID R. GLASS**

Title

**PETROLEUM ENGINEER**

Date

**JUL 22 1999**

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representation as to any matter within its jurisdiction.

\*See Instructions on Reverse Side

RECEIVED

JUL 09 '99

SLM  
ROSWELL, NM