Submit 3 Copies to Appropriate District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P 0. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO. 3001524543

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No. K-6854

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 "APPLICATION FOR PERMIT" (FORMC-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name: AVALON (DELAWARE) UNIT

1. Type of Well: OIL WELL [X] GAS WELL [ ] OTHER

8. Well No. 263

2. Name of Operator: EXXON CORPORATION

3. Address of Operator: ATTN: REGULATORY AFFAIRS P. O. BOX 4358 MIDLAND, TX 77210

9. Pool name or Wildcat: AVALON DELAWARE 3715

4. Well Location
Unit Letter P : 480 Feet From The South Line and 660 Feet From The East Line
Section 30 Township 20S Range 28E NMPM EDDY County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3243' GR

NOV 1997 RECEIVED OCD - ARTESIA

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [X]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]	CHANGE PLANS [ ]	COMMENCE DRILLING OPNS. [ ]	PLUG & ABANDONMENT [ ]
PULL OR ALTER CASING [ ]		CASING TEST AND CEMENT JOB [ ]	
OTHER: [ ]		OTHER: [ ]	

12. Describe Proposed or Completed Operations *(Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work)* SEE RULE 1103.

8/19/97
MIRU, PERF U. CHERRY CANYON @ 2686-2706 2714-2722 2732-2748. PERF U. BUSHY CANYON @ 3704-3724 2742-3750 WITH 3-1/8" GUN, 1SPF.

8/21/97
ACIDIZED PERFS W/2478 GALS. 7.5% HCL. FRAC'D (3704-3750) PERFS W/40,000# #'S SD, 17000 GALS. FLUID & 1200 GALS AC. FRAC'D (2686-2748) PERFS W/ 31000 #'S SD, & 18000 GALS FLUID.

8/25/97: RIH W/PRODUCTION STRING, SET @ 2617'

9/10/97: RETURN WELL TO PRODUCTION.

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

SIGNATURE Patti Sandoval TITLE Sr Staff Office Assistant DATE 11/13/97

TYPE OR PRINT NAME Patti Sandoval (713) 431-1212 TELEPHONE NO.

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY TIM W. GUM DISTRICT II SUPERVISOR TITLE _____ DATE NOV 25 1997

CONDITIONS OF APPROVAL, IF ANY: