

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240
DISTRICT II
811 South First, Artesia NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410
DISTRICT IV
2040 South Pacheco, Santa Fe, NM 87505

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

WELL API NO.
30-015-24543

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
K-6584

7. Lease Name or Unit Agreement Name
Avalon (Delaware) Unit

8. Well No.
263

9. Pool name or Wildcat
Avalon; Delaware 3715

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" (FORM C-101) FOR SUCH PROPOSALS)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Exxon Corp.	
3. Address of Operator P.O. Box 4358 Houston TX 77210-4358	
4. Well Location Unit Letter P : 480 Feet From The South Line and 990 Feet From The East Line Section 30 Township 20S Range 28E NMPH Eddy County	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3243' GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG & ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: **Temporary Abandonment** ☒

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. (For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion)

11/22/99 POH laying down rods and pump. Set CIBP @ 2586', dump bail 4 sks cmnt on top of plug (35').
11/23/99 Pressure test casing to 500 PSI for 30 minutes. RDMO.
11/29/99 RU pump truck, ran MIT, RD pump truck. MIT test attached.

Well at TA status.

This Approval of Temporary
Abandonment Expires 12-2004



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

SIGNATURE Allison Myrow TITLE **Staff Administrative Assistant** DATE **12/09/1999**
TYPE OR PRINT NAME **Allison C. Myrow** TELEPHONE NO. **(713) 431-1213**

(This space for State Use)

APPROVED BY [Signature] TITLE Field Rep DATE 12-22-99
CONDITIONS OF APPROVAL IF ANY:

PRINTED IN U.S.A.

10

11

12

1

2

3

4

5

6 NIGHT

DAY

5

4

3

2

1

12

11

10

9

8

7

6

5

4

3

2

1

TEJAS
INSTRUMENT ENGINEERS

METER NUMBER
TIME PUT ON
DATE PUT ON

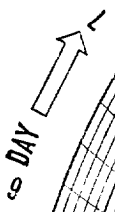
TUBE DRIVE SIZE
TIME TAKEN OFF
DATE TAKEN OFF

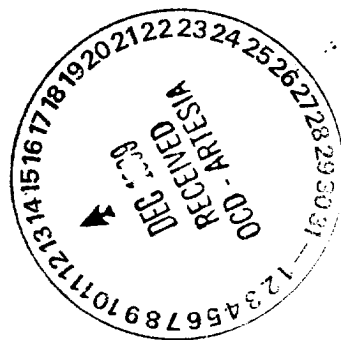
BR-4638
BO-100-8

SIGNED
ADD 263
MIT

11-29-64
63-64
TEJAS
INSTRUMENT ENGINEERS
MIT

TEJAS
INSTRUMENT ENGINEERS
MIT





Midland Production Organization
Injection/Disposal Well
Casing Integrity Test Results

Eddy

(Please Print)

- 1) Well Name and #: ADU #263
- 2) Date of Test: 11/29/99
- 3) Test Witnessed by RRC: Yes No (Please circle one)
If yes, name of RRC representative: Notified Betty Rollins @ NMOC @ ARRESTA 11/24/99 JSA
- 4) Test Pressure (psig):

*Sect 30, Township 20-S
Range 28-E
480 FSL + 990 FEL*

Time	Tubing	Casing	Intermediate Casing	Surface Casing
Initial				
15 Min.				
30 Min.				

- 5) Packer Setting Depth: CIBP @ 2586'
- 6) Injection Interval after WO (if changed): from: _____ to: _____
- 7) Reason for Test: After Workover
(Please circle) First Test Prior to Injection (i.e., conversion, drillwell)
Annual RRC Permit Required
5 yr. Test RRC Required
Other Csg Integrity - T/A
- 8) Well Status: Active Shut-In T/A'd
(Please circle)
- 9) Comments: _____
- 10) Name of person conducting test: _____
(Print name)

(Signature of person conducting test)

Attach ORIGINAL PRESSURE RECORDING CHART (with Exxon's field representative's signature) to this sheet. Please return this sheet within one (1) week after the test is completed to:

Karen Yarbrough
ERAG - Permits, ML 14
(915) 688-7871

