Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, . . . erals and Natural Resources Department

Form C-103 Revised 1-1-89

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

OIL CONSERVATION DIVISION P 0. Box 2088

WELL API NO.

DISTRICT II	30013270
P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico S	In Indicate Type of Lease
DISTRICT III	STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No.
	NM-01119
SUNDRY NOTICES AND REPORTS ON WEL	10
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN O	
DIFFERENT RESERVOIR. USE 'APPLICATION FOR PERI (FORMC-101) FOR SUCH PROPOSALS.)	MIT'
· · · · · · · · · · · · · · · · · · ·	AVALON (DELAMARE) UNIT
1. Type of Well: OIL GAS XOTHER TINJECTOR	<u>, </u>
WELL WELL	8. Well No.
2. Name of Operator EXXON CORPORATION	816
3. Address of Operator ATTN: REGULATORY AFFAIRS	9. Pool name or Wildcat
P. O. BOX 4358 HOUSTON, TX 77210	AVALON DELAMARE 3715
4. Well Location	TARENT BELOWNE 3123
Unit Letter A:6945Feet From The SOUTH Line and	560 Feet From The EAST Line
Section 5 Township 21S Range 2	
10. Elevation (Show whether D)F, RKB, RT, GR, etc.)
Check Appropriate Box to Indicate N	lature of Notice, Report, or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON PLUG AN	REMEDIAL WORK
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG & ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB
OTHER:	OTHER:MECHANICAL INTEGRITY TEST
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and gwork) SEE RULE 1103.	give pertinent dates, including estimated date of starting any proposed
FIVE-YEAR MECHANICAL INTEGRITY TEST C COPY OF CHART IS ATTACHED (CURRENTLY	
(COPY OF THIS FORM AND CHART MAILED T	
YATES C FEDERAL #35 AND YATES C FEDER	(AL #2/20)
	3031 123
	No man
	[g] 1997 3
	Section 1997 Se
I hereby certify that the information above is true and complete to the best of my knowledge and b	AK/Em.
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
SIGNATURE TITLE	Sr Staff Office Assistant DATE 09/22/97
TYPE OR PRINT NAME Karen Yarbrough	(713) 431-1022 TELEPHONE NO.
(This space for State Use)	
Sim W. Sum	Wit
ADDDOVED BY	District Supervisor 10 / w/

CSG INTEGRITY TEST - ADU # 816 8/6/97 @ 730# for 30 min. 9:33 to 9:58/

