

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen a well, back to a different reservoir. Use Form 9-331-C for such proposals.)

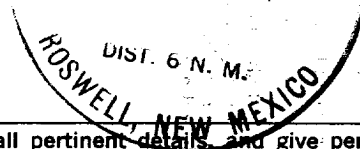
1. oil well ☒ gas well ☐ other ☐	RECEIVED BY FEB 02 1984 O. C. D. ARTESIA, OFFICE
2. NAME OF OPERATOR Exxon Corporation ✓	
3. ADDRESS OF OPERATOR P.O. Box 1600, Midland, Texas	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 407' FNL & 660' FWL of Sec. AT SURFACE: AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF ☐	☐
FRACTURE TREAT ☐	☐
SHOOT OR ACIDIZE ☐	☐
REPAIR WELL ☐	☐
PULL OR ALTER CASING ☐	☐
MULTIPLE COMPLETE ☐	☐
CHANGE ZONES ☐	☐
ABANDON* ☐	☐
(other) Spud & set casing	

5. LEASE NM-46275	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME --	
7. UNIT AGREEMENT NAME --	
8. FARM OR LEASE NAME Burton Flat "B" Federal	
9. WELL NO. 2	
10. FIELD OR WILDCAT NAME Undesig. Artesia <i>Rom Spring</i>	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 1-21S-27E	
12. COUNTY OR PARISH Eddy	13. STATE New Mexico
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 3198' GR	

(NOTE: Report results of multiple completion or zone change on Form 9-330.)



17. 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.)*

1-11-84 Spud @ 4:00 A.M.
Ran 13 3/8", 48#, H-40 csg. set @ 593' w/650 sx Lite, tailed
w/300 sx Class C cement, circulated. WOC.

1-12-84 Tested csg. to 1500# for 30 min., OK.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Peter W. Chester TITLE Unit Head DATE January 18, 1984

PETER W. CHESTER

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL IF ANY: JAN 31 1984