

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 or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐
2. NAME OF OPERATOR
Exxon Corporation Attn: Melba Knipling
3. ADDRESS OF OPERATOR
Box 1600, Midland, Texas 79702
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 4620' FSL and 660' FWL of Sec.
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

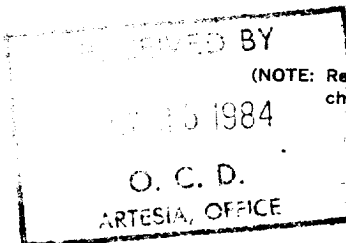
REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
☐
☐

(other) Change mud program



5. LEASE
NM-46275
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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7. UNIT AGREEMENT NAME
--
8. FARM OR LEASE NAME
Burton Flat B Federal
9. WELL NO.
3
10. FIELD OR WILDCAT NAME
Undesig. - Bone Springs
11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA
Sec. 1, 21S-27E
12. COUNTY OR PARISH
Eddy
13. STATE
NM
14. API NO.
30-015-24835
15. ELEVATIONS: (SHOW DF, KDB, AND WD)
3187 GR

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.)*

Type and anticipated characteristics of drill fluid.

Depth Interval	Mud Type	Weight	Funnel Visc.	WL	pH
0-600'	FW	8.4-8.8	25-30	--	10.5+
600-2500'	Air	(1600-1900 SCF/SEC.,	150-200	psi)	
2500-6100'	Cut BW	8.8-9.5	30-32	20	9-10

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

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

SIGNED Melba Knipling TITLE Unit Head DATE 5-4-84

APPROVED BY P. B. Pitts TITLE P.E. DATE 5-22-84
(This space for Federal or State office use)

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
MAY 23 1984
O.C.D.
HOBBS OFFICE