

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	<input checked="" type="checkbox"/>
LAND OFFICE	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>

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DEC 17 1985

3a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
3. State Oil & Gas Lease No.
L-3390 & L-654

SUNDY 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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Exxon Corporation ✓	8. Form or Lease Name South Carlsbad Gas Com. No. 3
3. Address of Operator P. O. Box 1600, Midland, TX 79702	9. Well No. 1
4. Location of Well UNIT LETTER <u>C</u> <u>990</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>26</u> TOWNSHIP <u>23S</u> RANGE <u>26E</u> NMPM.	10. Field and Pool, or Wildcat Undes.-Bone Spring
11. Elevation (Show whether DF, RT, GR, etc.) 3275' RKB 3259 GR	12. County Eddy

18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPER. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
		OTHER <u>Plugback to Bone Spring</u> <input checked="" type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

6-18-85 CIBP was set at 11070 w/5' cmt.
6-20-85 Perf 11056-10948 w/142 shots.
6-22-85 Acdz. w/5300 gals. 15% HCl.
6-23-85
6-27-85 Swabbed. Unsuccessful. Shut well in.
8-27-85 CIBP at 10878' w/35' cmt.
8-28-85 Perf 7677-7691 w/30 shots.
8-31-85 Acdz. w/2000 gals. 7 1/2% NeHCl.
9-11-85 Frac w/25,000 gals. crosslink CO₂ and 30,000# 20-40 sd.
9-25-85 Ran 4 point test w/24 hr. calculated rates as follows:
5.82 BO, 321.24 MCF, 1 BW.

FRW 9-25-85

Post ID 2
1-3-85
p+h mm.

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

SIGNED <u>[Signature]</u>	TITLE <u>Unit Head</u>	DATE <u>12-16-85</u>
APPROVED BY <u>Les A. Clements</u>	TITLE <u>Supervisor District II</u>	DATE <u>DEC 30 1985</u>
CONDITIONS OF APPROVAL, IF ANY:		