

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYForm approved.
Budget Bureau No. 42-R1424.

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—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-23177	
2. NAME OF OPERATOR Exxon Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---	
3. ADDRESS OF OPERATOR P.O. Box 1600, Midland, Texas 79702		7. UNIT AGREEMENT NAME Laguna Grande Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FWL & 660' FSL		8. FARM OR LEASE NAME Laguna Grande Unit	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) Later		10. FIELD AND POOL, OR WILDCAT Laguna Grande Morrow Gas	
16. Check Appropriate Box To Indicate Nature of Work, Report, or Other Data		11. SEC., T., R., M., or BLK. AND SURVEY OR AREA Sec. 27, T23S, R29E	
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.)		12. COUNTY OR PARISH Eddy	
		13. STATE New Mexico	

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

Spudded 17-1/2" hole at 4:00 A.M. 7-8-77.

Drilled 17-1/2" hole to 370'. Ran 5 Jts. (340') 13-3/8" 48# & 61# csg. set at 363'. Cmt. w/400 sx. Cl. "C" w/2% CaCl. Cmt. did not circ. WOC 4 hrs. Ran 1" found top of cmt. at 256', cmt. w/100 sx. Cl. "C" w/4% CaCl. Did not circ. WOC 3 hrs., ran 1" found top of cmt. at 125', pumped 150 sx. Cl "C" w/4% CaCl, circ. 15 sx. to pit. Job comp. 11:30 A.M. 7-9-77. WOC. Test csg. w/1000 psi, held OK.

Drilled cmt. and shoe at 5:30 A.M. 7-11-77.

Drilling.

RECEIVED
AUG 5 1977
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED D. L. Clemmer TITLE Unit Head DATE 8-1-77

(This space for Federal or State office use)

APPROVED BY R. L. Buehler TITLE DISTRICT ENGINEER DATE AUG 8 - 1977

*See Instructions on Reverse Side