

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL & GAS COMMISSION

SUBMIT IN TRIPLICATE
(Other instructions on reverse)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different depth.
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 10895	
2. NAME OF OPERATOR Exxon Corporation / Attn: Permits Supervisor		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 1600, Midland, TX 79702		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FNL, 1980' FEL		8. FARM OR LEASE NAME North Horseshoe Bend	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3857' GL		10. FIELD AND POOL, OR WILDCAT Wildcat - Strawn	
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22 T23S R25E	
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 NM	

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other)

PULL OR ALTER CASING
MULTIPLE COMPLETION
ABANDON*
CHANGE PLANE

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other)

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

Mechanical Integrity Test

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

08-02-89 Set cmt. ret. 9576'. Squeezed perf's 9696' - 10,052' below ret.
w/ 100 sx. @ 1200 #. Spotted 5 sx. on top of plug, 9576' - 9541'.
Displaced w/ 1600 gals. gel brine.
08-03-89 Cut off 5-1/2" casing @ 8010'. Lay down casing.
08-05-89 Spotted 50 sx. plug from 8050' - 7900'. Displaced w/ gel brine. Tagged @ 7400.
08-07-89 Tubing stuck. Determined free point @ 3501'.
08-08-89 Pumped 600 sx cmt. 6105' - 4000'. Displaced down tbg. to 4000'. Cut off
tbg. @ 3475'. Spotted 50 sx. cmt. 3475' - 3360'. Tagged plug @ 3360'. Lay down
tbg. to 2500'. Spot 50sx cmt. 2500' - 2350'
08-09-89 Tagged plug @ 2350'. Could not find cmt. Spotted another 50 sx. plug
2350' - 2240'. Lay down tbg. Spotted 220 sx plug from 600' to surface.
Cut off wellhead and install dry hole marker.

Jose Sanchez w/ BLM witnessed plugging. All plugs Class H cmt.

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

SIGNED

TITLE

Sr. Clerical Assistant

DATE

9-18-89

(This space for Federal or State Office use)

APPROVED BY

TITLE

DATE

10/2/89

CONDITIONS OF APPROVAL, IF ANY:

Approved by _____ of the well owner
until
surface restoration is completed.

*See Instructions on Reverse Side