

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX NOV 03 1983  
SANTA FE, NEW MEXICO 87501

O. C. D.  
ARTESIA, OFFICE

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease  
State ☒ Fee ☐

5. State Oil & Gas Lease No.  
L-654

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER -	7. Unit Agreement Name ---
2. Name of Operator Exxon Corporation	8. Farm or Lease Name New Mexico "DI" State
3. Address of Operator P.O. Box 1600; Midland, Texas 79702	9. Well No. 3
4. Location of Well UNIT LETTER <u>L</u> <u>for 3</u> 1980 FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>19</u> TOWNSHIP <u>23S</u> RANGE <u>26E</u> NMPM.	10. Field and Pool, or Wildcat Wildcat - <u>San Vito</u>
15. Elevation (Show whether DF, RT, GR, etc.) 3476' GR	12. County Eddy

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

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

OTHER Amend Casing Program

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOBS ☐  
OTHER ☐

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

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 1103.

Please amend the casing and cementing program as follows:

Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks of Cement	Est. Top
20"	16"	65#	60'	30sx Redimix	Surface
11" 12 1/4"	8 5/8"	24#	1600'	600sx	Surface
7 7/8"	5 1/2"	14#	5400'	500sx	Tie into surface csg.

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

SIGNED Melba Knippling TITLE Unit Head DATE November 2, 1983

APPROVED BY \_\_\_\_\_ TITLE Original Signed By Leslie A. Clements Supervisor District II DATE DEC 13 1983

CONDITIONS OF APPROVAL, IF ANY: