

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  
3. ADDRESS OF OPERATOR  
P.O. Box 1600 Midland, TX 79702  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1980' FSL & 1980' FEL of Section  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input checked="" type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) _____	_____

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.)\*

Spudded 17½" hole 7:15 p.m. 12/8/80  
Drilled 17½" hole to 428'  
Ran 9 jts 13 3/8" 48# H-40 csg set at 416'. Cmt. w/ 400 sx C1 "C" 2% CLC, 50 sx to surface, bumped plug at 8:00 p.m. 12/11/80. WOC.

Tested 13 3/8" csg at 5:45 p.m. 12/12/80 w/ 500# - held ok.  
Drilling.

5. LEASE  
NM 22624  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Lukens Federal FEB 25 1981  
9. WELL NO.  
1  
10. FIELD OR WILDCAT NAME  
Undesignated Morrow  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 25, T26S, R25E  
12. COUNTY OR PARISH 13. STATE  
Eddy NM  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
Later

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Peter W. Claster TITLE Sr. Administrator DATE 2/11/81

ACCEPTED FOR RECORD (This space for Federal or State office use)  
PETER W. CLASTER  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

FEB 25 1981

U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO See Instructions on Reverse Side