

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 ☐ other2. NAME OF OPERATOR
Exxon Corporation, Attn: Melba Knipling3. ADDRESS OF OPERATOR
P. O. Box 1600, Midland, Texas 797024. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
760' FNL and 660' FEL of Section
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

SUBSEQUENT REPORT OF:

(other) alter casing program

RECEIVED BY

MAY 15 1984

O. C. D.
ARTESIA, OFFICE

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

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.)*

Sundry notice to change casing program as follows:

String	Size	Weight/Grade	Condition	Depth Interval
Surface	13 3/8"	61#/K-55	New	0-682'
Intermediate	8 5/8"	24#/K-55	New	0-245'
Intermediate	8 5/8"	32#/K-55	New	245'-3450'
Production	5 1/2"	17#/C-75	New	0-7200'

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Melba Knipling TITLE Unit Head DATE 5-8-84

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED

MAY 14 '84

ENGINEER