IN COLUMN D STATES	_EASE
DEPARTMENT OF THE INTERIOR	NM-20966
CEIVED BY GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
W 88 NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to deepen or plug back to a different	8. FARM OR LEASE NAME
TESIA, OFFICE	New Era Federal
well well other	9. WELL NO.
2. NAME OF OPERATOR Exxon Corporation, Attn: Melba Knipling	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Undesig. Delaware
P. O. Box 1600, Midland, TX 79702	11. SEC., T., R., M., OR BLK. AND SURVEY OF AREA
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	Sec. 19-26S-30E
AT SURFACE: 760' FNL & 660' FEL of Section	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	Eddy County NM
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	20-015-24831 15. ELEVATIONS (SHOW DF, KDB, AND WO
	3121 GR
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF	
TEST WATER SHUT-OFF	A STATE OF THE STA
SHOOT OR ACIDIZE	
REPAIR WELL	(NOTE: Report results of multiple completion or zon
PULL OR ALTER CASING	change on Form 9–330.)
MULTIPLE COMPLETE	A 100 Co.
ABANDON* (Temp.)	
ABANDON* (Temp.)	
ABANDON® (Temp.)	all pertinent details, and give pertinent date: rectionally drilled, give subsurface locations and to this work.)*
ABANDON* (Temp.) (other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dismeasured and true vertical depths for all markers and zones pertinent Please authorize a delay of one year for the permane well. APPRO	all pertinent details, and give pertinent dates rectionally drilled, give subsurface locations and to this work.)*
ABANDON* (Temp.) (other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dismeasured and true vertical depths for all markers and zones pertinent Please authorize a delay of one year for the permane well. APPROPRIED APPROP	e all pertinent details, and give pertinent dates rectionally drilled, give subsurface locations and to this work.)* ent abandonment of this OVED FOR 12 MONTH PERIOD
ABANDON* (Temp.) (other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinent Please authorize a delay of one year for the permane well. APPROENDIN	all pertinent details, and give pertinent dates rectionally drilled, give subsurface locations and to this work.)* ent abandonment of this OVED FOR 12 MONTH PERIOD 11/21/85 Set @F
APPRO Subsurface Safety Valve: Manu. and Type 18. I hereby certify that the foregoing is true and correct: SIGNED MC Liva Carrier and Space of State office of State of State of Space of State of State of Space of Space of State of Space of Spa	all pertinent details, and give pertinent dates rectionally drilled, give subsurface locations and to this work.) ent abandonment of this OVED FOR 12 MONTH PERIOD II/21/85 Set @F