

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.)

RECEIVED

1. oil ☒ gas ☐ 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' FWL and 760' FSL 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:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) Amend casing program

SUBSEQUENT REPORT OF:

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17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, 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.)*

Please amend the casing and cementing program for the above well as follows:

Size of Hole	Size of Casing	Weight per Foot	Setting Depth	Quantity of Cement
26"	20"	106.5#	40'	25 sx Redimix
17 1/2"	13 3/8"	72.0#	600'	500 sx
11"	8 5/8"	24.0#	2500'	500 sx (into surf. csg.)
7 7/8"	5 1/2"	14.0#	4700'	500 sx

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

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

SIGNED Melro Kniglon TITLE Unit Head DATE March 16, 1982

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL IF ANY:

18 1983
James A. Gilliam
INSTRUMENT SUPERVISOR

*See Instructions on Reverse Side

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Yates Federal
9. WELL NO.
16
10. FIELD OR WILDCAT NAME Undesig.
Burton Flat (Delaware) Artesia
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 31-20S-28E
12. COUNTY OR PARISH Eddy
13. STATE New Mexico
14. API NO.
30-015-24380
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3277.8

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

OIL & GAS
MINERALS MGMT. SERVICE
ROSWELL, NEW MEXICO