

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
E-2064

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- SALT WATER INJECTION	7. Unit Agreement Name
2. Name of Operator EXXON CORPORATION	8. Farm or Lease Name UNIT SOUTH FOUR LAKES
3. Address of Operator BOX 1600, MIDLAND, TEXAS 79702	9. Well No. 6
4. Location of Well UNIT LETTER T 1980 FEET FROM THE SOUTH LINE AND 660 FEET FROM THE EAST LINE, SECTION 2 TOWNSHIP 12-S RANGE 34-E NMPM.	10. Field and Pool, or Whidcat FOUR LAKES PENN
15. Elevation (Show whether DF, RT, GR, etc.) 4159 DF	12. County LEA

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

- PULLED TUBING, PACKER AND CLEAN OUT TO 10,280'.
- ACIDIZED PERFS 9830-10271' w/6000 GAL 15% ACID.
- PLACED WELL ON INJECTION.

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

SIGNED J. H. Louie TITLE S.M. ADMIN. DATE 1-9-85

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT 1 SUPERVISOR DATE JAN 15 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JAN 14 1985

O.C.O.
HODRS OFFICE