

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.

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Exxon Corporation	8. Farm or Lease Name John D. Knox
3. Address of Operator Box 1600 Midland, TX 79702	9. Well No. 10
4. Location of Well UNIT LETTER <u>G</u> <u>1650</u> FEET FROM THE <u>North</u> LINE AND <u>1752</u> FEET FROM THE <u>East</u> LINE, SECTION <u>10</u> TOWNSHIP <u>21</u> RANGE <u>36</u> NMPM.	10. Field and Pool, or WHdcat Oil Center Blinebry
15. Elevation (Show whether DF, RT, GR, etc.) 3588 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 checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input 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 JOBS <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 1703.

1. Pull production equipment.
2. Perf. 4½" csg from 587-6090 w/ 1 SPF. Total 35 shots.
3. Spot 150 gal. of 15% NE HCl across interval 5871-6090.
4. Acidize w/ 4300 gal. of 15% NE HCl acid.
5. Place well on production.

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

SIGNED [Signature] TITLE Sr. Administrator DATE 2/25/81

APPROVED BY [Signature] TITLE \_\_\_\_\_ DATE MAR 3 1981

CONDITIONS OF APPROVAL, IF ANY: