MAY 12 2009 OCD-ARTESIA

Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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ORM AP	PROVED
OMB No.	
T2	1. 21 2010

T		C:-1 NI-	
	•		Expires: July 31, 20
		. "	OMB No. 1004-013

SUNDRY NOTICES AND RI Do not use this form for proposa abandoned well. Use Form 3160-3	ils to drill or to re-enter an	6. If Indian, Allottee or Tribe Name				
SUBMIT IN TRIPLICATE – C	7. If Unit of CA/Agreement, Name and/or No.					
1. Type of Well						
Oil Well Gas Well	8. Well Name and No. AVALON (DELAWARE) UNIT 556					
2. Name of Operator EXXON MOBIL OIL CORPORATION		9. API Well No. 30-015-24379				
3a. Address P.O. Box 4358, CORP-MI-PO42, HOUSTON, TX 77210-4358	10. Field and Pool or Exploratory Area AVALON; DELAWARE 3415					
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Descrip 660 FSL 660 FWL SE/SE SECTION 31 T20S R28E	ption)	11. Country or Parish, State EDDY, NM				
12. CHECK THE APPROPRIAT	E BOX(ES) TO INDICATE NATURE OF NOTI	ICE, REPORT OR OTHER DATA				
TYPE OF SUBMISSION .	TYPE OF AC	TION				
Notice of Intent ☐ Acidize ☐ Alter Casing ☐ Casing Repair	Fracture Treat Rec	duction (Start/Resume)				
Change Plans	Plug and Abandon Tem	nporarily Abandon				
Final Abandonment Notice Convert to Inject	tion Plug Back Wat	ter Disposal ·				
Attach the Bond under which the work will be performed of following completion of the involved operations. If the optesting has been completed. Final Abandonment Notices and determined that the site is ready for final inspection.) A Subsequent Report Sundry was ACCEPTED FOR RECORD	eration results in a multiple completion or recom must be filed only after all requirements, including	pletion in a new interval, a Form 3160-4 must be filed once g reclamation, have been completed and the operator has				
This Sundry is a Final Abandonment Notice for the well location.						
Please contact Lyndal Trout @ 432-596-4210 extension	10, if you need to schedule site visit with Exx	onMobil personnel present.				
		ACCEPTED FOR RECORD				
		MAY 7 2009				
		BUREAU OF LAND MANAGEMENT				
14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)		CARLSBAD FIELD OFFICE				
Mark Del Pico	Title Staff Regulatory S	pecialist				
Signature M. Del Pin	Date 04/29/2009					
THIS SPACE FOR FEDERAL OR STATE OFFICE USE						
Approved by						

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.