MA DIL: CORRY EQUALSSION         Prem 9-331 Dec: 1973         Form 9-331 DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY         DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY         SUNDRY NOTICES AND REPORTS ON WELLS Control use this form by comparate to dement of plug back to a different well         SUNDRY NOTICES AND REPORTS ON WELLS Control use this form by comparate to dement of the different well         1. oil       gas         2. NAME OF OPERATOR P. O. Dox 1600. Midland. Texas 79702         4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 the SUNFACE: 1810' FNL and 963' FEL of Sec. AT TOP PROD. INTERVAL: AT TOTAL DEPTH:         16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE. BROOK OR ACICL2         17. DESCHEE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details. and give pertinent details. ANDION'         REPART WELL SUBSEQUENT REPORT OF: Test WATER SHUT-OFF BROOK OR ACICL2         INOTE Report results of multiple completion or zone change on form 9-330.1         NOTE: Report results of multiple completion or zone change on form 9-330.1         NOTE: Report results of multiple completion or zone change on form 9-330.1         NOTE: Report results of multiple completion or zone change on form 9-330.1         NOTE: Report results of multiple completion or zone change on form 9-330.1         NOTE: Report results of multiple completion or zone change on form 9-330.1	kne -	
Image: 1973       Dudge: Burger No. 42-R1424         Dec. 1973       DEPARTMENT OF THE INTERIOR         DEPARTMENT OF THE INTERIOR       GEOLOGICAL SURVEY       C. C. D.         Image: State	Drawer DD	80-
USE NUMERY OF THE INTERIOR         DEPARTMENT OF THE INTERIOR         GEOLOGICAL SURVEY         OPENATION OF INTERIOR         SUNDRY NOTICES AND REPORTS ON WELLS         SUNDRY NOTICES AND REPORTS ON WELLS         Colspan="2">Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="		form Approved.
GEOLOGICAL SURVEY       C. D.         GEOLOGICAL SURVEY       C. D.         Multise office         SUNDRY NOTICES AND REPORTS ON WELLS         Multise office         Constant of the properties of drill or to deepen or plug back to a different masson Draw Fed Unit         NAME OF OPERATOR         1. oil		
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to different servori. Use form form proposals to different servori. Use form form proposals to different well	GEOLOGICAL SURVEY O. C. D.	
<pre>reservoir. Use Form 9-331-C for such proposals.) 1. oii well cast - Dry 2. NAME OF OPERATOR Exxon Corporation 3. ADDRESS OF OPERATOR Exxon Corporation 3. ADDRESS OF OPERATOR P. O. Box 1600, Midland, Texas 79702 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below) 1. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13-23S-4W 12. COUNTY OR PARISH 13. STATE AT TOT PROD. INTERVAL: AT TOT PROD. INTERVAL: AT TOT PROD. INTERVAL: AT TOT ROT OF HE BOX TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF REPAR WELL REPAR MET ADATA REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF RACTURE TRAFT REPAR WELL REPAR REPAR</pre>	SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME Mason Draw Unit (Pending)
well       well       other       DTy         2. NAME OF OPERATOR	eservoir, Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME Mason Draw Fed Unit
Exxon Corporation         3. ADDRESS OF OPERATOR         P. O. Box 1600, Midland, Texas 79702         4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below) AT SURFACE: 1810' FNL and 963' FEL of Sec. AT TOP PROD. INTERVAL: AT TOTAL DEPTH:         16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA         REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:         TEST WATER SHUT-OFF         PLUL OR ALCTER CASING         MULTIPLE COMPLETE         CHARGE ZONES         ABANDON*         Vik         Vik         The above well was plugged as follows February 17 - 19, 1984.         1. 11490-11696' w/100 sx CIH         Cap well and install dry hole markers         3. 8800 - 9001' w/100 sx CIH         3. 8800 - 9001' w/100 sx CIH         Cap well and install dry hole marker         3. 8800 - 9001' w/100 sx CIH         Cap well and install dry hole marker         3. 8800 - 9001' w/100 sx CIH         Cap well and install dry hole marker         3. 8007 - 901' w/100 sx CIH         Cap well and install dry hole marker         3. 800 - 9001' w/100 sx CIH         Cap well and install dry hole marker         3. 800 - 9001' w/100 sx CIH         Cap well and install dry hole marker         3. 100-1188 w/120 sx CIH Neat	well well other Dry	9. WELL NO.
3. ADDRESS OF OPERATOR       P. O. Box 1600, Midland, Texas 79702         4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17       11. SEC., T.R., M., OR BLK. AND SURVEY OR         AREA       Sec. 13-235-4W         11. SEC., T.R., M., OR BLK. AND SURVEY OR         AREA       Sec. 13-235-4W         12. COUNTY OR PARISH       13. STATE         Dona       Ana         AT TOP PROD. INTERVAL:       AT TOTAL DEFTH:         13. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,       New Mexico         REPORT, OR OTHER DATA       SUBSEQUENT REPORT OF:         TEST WATER SHUT-OF       Image on Form 9-330.         PULL OR ALTER CASING       Image on Form 9-330.         MULTIPLE COMPLETE       Image on Form 9-330.         PULL OR ALTER CASING       Image on Form 9-330.         MULTIPLE COMPLETE       Image on Form 9-330.         The above well was plugged as follows February 17 - 19, 1984.       Cap well and install dry hole         MEADO-11686' w/100 sx ClH       Image on Form 9-30.         State       y-16-2         1. 1100-1188 w/120 sx ClH Neat       Image on Form 9-30.         Surface - 93' w/30 sx ClH Neat       Image on Form 9-30.		10. FIELD OR WILDCAT NAME
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1810' FNL and 963' FEL of Sec. AT TOP PROD. INTERVAL: AT TOTAL DEPTH:       AREA       Sec. 13-23S-4W         12. COUNTY OR PARISH 13. STATE Dona Ana       New Mexico         14. API NO.		
AT SURFACE: 1810' FNL and 963' FEL of Sec. AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF RRCTURE TREAT WULLIPLE COMPLETE CHANGE ZONES AGANDON' 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, 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.'* The above well was plugged as follows February 17 - 19, 1984. 1. 11490-11696' w/100 sx C1H Cap well and install dry hole marker 3. 8800 - 9001' w/100 sx C1H 4 7051'; Did not tag 5. 6710-7051 w/100 sx C1H Neat 6. 4400-4488' w/50 sk C1H Neat 6. 4400-4488' w/50 sk C1H Neat 6. Surface - 93' w/30 sx C1H 8. Surface - 93' w/30 sx C1H CANCE	4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	1 4554
AT TOTAL DEPTH:       Deve Maxico         16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       14. API NO.         16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       30-013-20014         15. ELEVATIONS (SHOW DF, KDB, AND WD)       4429' CR         16. CHECK APPROVAL TO:       SUBSEQUENT REPORT OF:       4429' CR         16. CHECK APPROVAL TO:       SUBSEQUENT REPORT OF:       15. ELEVATIONS (SHOW DF, KDB, AND WD)         17. DESCRIBE REAT       16. CHECK APPROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any processed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*         17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any processed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*         The above well was plugged as follows February 17 - 19, 1984.       1. 11490-11696' w/100 sx CHH       Cap well and install dry hole         18. 020-10808' w/100 sx CHH       Marker       Cap well and install dry hole         19. 670-7051 w/100 sx CHH       Marker       Marker         100-1188 w/120 sx CHH Neat       Surface - 93' w/30 sx CHH       3 - 1L - 24         100-12	AT SURFACE: 1810' FNL and 963' FEL of Sec.	12. COUNTY OR PARISH 13. STATE
REPORT, OR OTHER DATA         IS. ELEVATIONS (SHOW DF, KOB, AND WD)         REQUEST FOR APPROVAL TO:         SUBSEQUENT REPORT OF:         TEST WATER SHUT-OFF         GRACTURE TREAT         SHOOT OR ACIDIZE         REPAIR WELL         ONTE: Report results of multiple completion or zone         CHANGE ZONES         ABANDON*         ULTIPLE COMPLETE         CHANGE ZONES         ABANDON*         IX.         DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, 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.)*         The above well was plugged as follows February 17 - 19, 1984.         1.       11490-11696' w/100 sx ClH         Cap well and install dry hole marker         3.       8800 - 9001' w/100 sx ClH         Cap well and install dry hole         marker         5.       6710-7051 w/100 sx ClH Neat         6.       4400-4488' w/50 sk ClH Neat         7.       1100-1188 w/120 sx ClH Neat         8.       Surface - 93' w/30 sx ClH         7.       1100-1188 w/120 sx ClH Neat         8.       Surface - 93' w/30 sx ClH </td <td>AT TOTAL DEPTH:</td> <td></td>	AT TOTAL DEPTH:	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF SHOOT OR ACIDIZE REPART WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, 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.)* The above well was plugged as follows February 17 - 19, 1984. 1. 11490-11696' w/100 sx CIH Cap well and install dry hole marker 3. 8800 - 9001' w/100 sx CIH 4 7051';Did not tag 5. 6710-7051 w/100 sx CIH Neat 6. 4400-4488' w/50 sk CIH Neat 6. 4400-4488' w/50 sk CIH Neat 8. Surface - 93' w/30 sx CIH 8. Surface - 93' w/30 sx CIH 9. M.		
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.)* The above well was plugged as follows February 17 - 19, 1984. 1. 11490-11696' w/100 sx C1H 2. 10620-10808' w/100 sx C1H 3. 8800 - 9001' w/100 sx C1H 4 7051';Did not tag 5. 6710-7051 w/100 sx C1H Neat 6. 4400-4488' w/50 sk C1H Neat 7. 1100-1188 w/120 sx C1H Neat 8. Surface - 93' w/30 sx C1H 7. $1100-1188 w/120 sx C1H Neat$ 8. Surface - 93' w/30 sx C1H 7. $1100-1188 w/120 sx C1H Neat$ 7. $3-1k-84$ 7. $9+A$	SHOOT OR ACIDIZE	change on Form 9–330.)
1. 11490-11696' w/100 sx ClH 2. 10620-10808' w/100 sx ClH 3. 8800 - 9001' w/100 sx ClH 4 7051';Did not tag 5. 6710-7051 w/100 sx ClH Neat 6. 4400-4488' w/50 sk ClH Neat Perf 1173-1175 w/6 shots 7. 1100-1188 w/120 sx ClH Neat 8. Surface - 93' w/30 sx ClH 7. 100-1188 w/120 sx ClH Neat 8. Surface - 93' w/30 sx ClH 9. Surface - 93' w/30 sx ClH	including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertiner	lirectionally drilled, give subsurface locations and tt to this work.)*
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The second s	Perf 1173-1175 w/6 shots 7. 1100-1188 w/120 sx ClH Neat 8. Surface - 93' w/30 sx ClH 3-16-	
Subsurface Safety Valve: Manu. and Type Ft.	$\gamma + \eta$	
	Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	18. I hereby certify that the foregoing is true and correct	
SIGNED Del ba Frigling TITLE Unit Head DATE -3-12-84	SIGNED Del ba Knipling TITLE Unit Head	d
/(This space for Federal or State office use)	(This space for Federal or State of	fice use)
APPROVED BY TITLE DATE DATE PROVED		DATE DATE PETTR W. CHESTER
Approved as to plagging of the well bore, Liability under bond is retained until surface restoration is completed, Liability under bond is completed, Liability under bond is completed,	Approved as to plugging of the well bor Liability under bond is retained until	
*See Instructions on Reverse Side		SIDE BUREAL OF LAND MANAGEM ROSWELL RESOURCE ARE

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