

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil & Gas Division

311 S. 1st St.
Albuquerque, NM 87102-2834

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: September 30, 1990

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

EXXON CORPORATION ATTN: REGULATORY AFFAIRS

3. Address and Telephone No.

P O BOX 4358 HOUSTON, TX 77210 (713) 431-1024

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660' FSL & 660' FWL, SEC 31, T20S, R28E

5. Lease Designation and Serial No.

NM-01119

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

NMM194450X

8. Well Name and No.

RECEIVED
AVALON (DELAWARE) UNIT
556

9. API Well No.

3001524379

10. Field and Pool, or Exploratory Area

AVALON DELAWARE 3715

11. County or Parish, State

EDDY

NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other
- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection

RENEW TA STATUS

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

(PREVIOUSLY, THIS WELL WAS THE YATES C FEDERAL #15)

RENEW TA STATUS. THIS WELL WILL BE NEEDED IN THE FUTURE FOR SECONDARY AND TERTIARY RECOVERY PROJECT.

2/11/97 CASING INTEGRITY TEST ATTACHED

SEE ATTACHED FOR
CONDITIONS OF APPROVAL
RECEIPT OF ORIGINAL TEST

APPROVED FOR 12 MONTH PERIOD
ENDING FEB 11 1999

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

Signed

J. R. Ward

J. R. Ward
Sr. Regulatory Specialist

Date 01/20/98

(This space for Federal or State office use)

Approved by (ORIG. SGD.) LES BABYAK

Title

PETROLEUM ENGINEER

Date

FEB 06 1998

Conditions of approval, if any:

