

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

clst
up

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 3001524414
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. K-6854-2
7. Lease Name or Unit Agreement Name AVALON (DELAWARE) UNIT
8. Well No. 262
9. Pool name or Wildcat AVALON DELAWARE 3715

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" (FORMC-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator EXXON CORPORATION
3. Address of Operator ATTN: REGULATORY AFFAIRS ML#14 P. O. BOX 1600 MIDLAND, TX 79702
4. Well Location Unit Letter O : 560 Feet From The SOUTH Line and 1980 Feet From The EAST Line Section 30 Township 20S Range 28E NMPM EDDY County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3258' GR

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input checked="" type="checkbox"/>	

12. 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.

04/18/96 DO 30' CMT AND CIBP, CLEAN OUT TO 3810'
04/19/96 PERF 3666' TO 3700' 1SPF W/ RHSC 3 1/8" GUN
04/10/96 PUMPED 180 GALS 15% HCL, AND FRAC W/ 40000# 16/30 # SAND AND 16000 GALS FLUID, RIH W/ PRODUCTION EQUIPMENT TO 3443'
05/15/96 INSTALL NEW PUMPING UNIT AND STARTED WELL UP

RECEIVED

JUN - 8 1996

OIL CONSERV. DIV.

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

SIGNATURE Sharon B Timlin TITLE Sr. Staff Office Assistant DATE 05/29/96

TYPE OR PRINT NAME Sharon B. Timlin (915) 688-6166 TELEPHONE NO.

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY TIM W. GUM TITLE DISTRICT II SUPERVISOR DATE JUN 6 1996

CONDITIONS OF APPROVAL, IF ANY: