STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No.: E-9089

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 [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name:

2. Name of Operator: Exxon Corporation Attn: Permits Supervisor

8. Farm or Lease Name: New Mexico BW State

3. Address of Operator: P. O. Box 1600, Midland, TX 79702

9. Well No.: 1

4. Location of Well: UNIT LETTER K, 1874 FEET FROM THE South LINE AND 2086 FEET FROM THE West LINE, SECTION 20 TOWNSHIP 8S RANGE 33E NMPM.

10. Field and Pool, or Wildcat: Tobac Pennsylvanian

15. Elevation (Show whether DF, RT, GR, etc.)

12. County: Chaves

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [X]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER [ ]		OTHER [ ]	

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 1103.

11-02-87 Perforated: 8985'-9006', 8974'-8982', 8959'-8967', 8950'-8955', 8943'-8948', 8927'-8933'.

11-03-87 Acid frac w/ 20,000 gal of gelled 15% HCL and 15,000 gal of gelled KCL.

11-04-87 RIH w/ 2 3/8 tbg to 9007' and 2" x 1 1/4" x 16' rod pump.

11/6-26/87 Pump test.

11-27-87 24 hr pump test 90 BO, 32 BW, FRW.

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

David A. Murray

SIGNED David A. Murray TITLE Permits Supervisor DATE 12-9-87

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE DEC 1 1987

CONDITIONS OF APPROVAL, IF ANY: