

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 <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- 2. Name of Operator Exxon Corporation 3. Address of Operator P. O. Box 1600, Midland, Texas 79702 4. Location of Well UNIT LETTER C, 1980 FEET FROM THE West LINE AND 660 FEET FROM THE North LINE, SECTION 20 TOWNSHIP 8-S RANGE 33-E NMPM.	7. Unit Agreement Name 8. Farm or Lease Name New Mexico "BW" State 9. Well No. 3 10. Field and Pool, or WHdcat Tobac Penn.
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Chaves

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

1. Pull production equipment .
2. Perf 8870-72', 8894-99', 8936-46', Total 37 shots
3. Acidize perfs w/3000 gal 10% HCl MCA acid.
4. Pull treating equipment.
5. Run production equipment and test.

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

SIGNED S. P. Laine TITLE Sr. Administrator DATE January 13, 1983

ORIGINAL SIGNED BY

JERRY SEXTON

APPROVED BY _____ TITLE _____ DATE JAN 20 1983

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JAN 19 1983

O.C.D.
HOBBS OFFICE

100-100000-100000
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