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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

SEP 12 10 30 AM '69

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. K-4495
7. Unit Agreement Name
8. Farm or Lease Name New Mexico BX State
9. Well No. 1
10. Field and Pool, or Wildcat Tobac Penn
12. County Lea

SUNDY 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 <input type="checkbox"/>	CHANGE OPERATOR NAME FROM HUMBLE OIL & REFINING COMPANY TO EXXON CORPORATION EFFECTIVE JANUARY 1, 1973
2. Name of Operator Humble Oil & Refg Co.	
3. Address of Operator P.O. Box 1600- Midland, Texas 79701	
4. Location of Well UNIT LETTER M 557' FEET FROM THE S LINE AND 772' FEET FROM THE W LINE, SECTION 16 TOWNSHIP 8-S RANGE 33-E NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.) 4396 DF	

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

MIRU. pulled production equipment out of hole. Acidized perfs from 8981-8987' w/ 5000 gal. of 28% inhibited HCL acid mixed w/ 5 gal. of Dowell w-35 and 120 bbl flush. Rate 5.7 bpm @ 400 psi on csq. Reran production equipment and return well to producing status.

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

SIGNED [Signature]

TITLE Unit Head

DATE 9/9/69

APPROVED BY [Signature]

TITLE REVIEWER

DATE SEP 12 1969

CONDITIONS OF APPROVAL, IF ANY: