

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ gas ☐  
well well other

2. NAME OF OPERATOR

EXXON CORPORATION

3. ADDRESS OF OPERATOR

Box 1600, MIDLAND, TEXAS 79702

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON\* ☐

(other) ADD PAY ☒

SUBSEQUENT REPORT OF:

☐

☐

☒

☐

☐

☐

☐

☐

☒

5. LEASE

NM-055564

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

ISLER FEDERAL

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

MANY GATES WOLF CAMP

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

SEC 31, T-5, 30-E

12. COUNTY OR PARISH

CHAVES

13. STATE

N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

4042

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

17. 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.)\*

1. PULL RODS AND TBG.

2. PERF 4 1/2 CSG 7230-7244-155 HOTS (ADDED PAY)

3. SPOTTED 120 GAL 20% HCL SET PKR AT 7100. ACIDIZED PERFS 7248-7281 w/8000 GALS 20% HCL.

4. PLACED WELL ON PUMP.

5. TESTED 8 DAYS - FINAL TEST 2080 - 60 BW.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED

*A. P. Lowe*

TITLE

Asst. Admin

DATE

8-1-85

APPROVED BY

APPROVED  
PETER W. CHESTER

(This space for Federal or State office use)

TITLE

DATE

CONDITIONS OF APPROVAL IF ANY

FEB 27 1986

LAND MANAGEMENT

RECEIVED  
FEB 28 1986  
C.D.D.  
HOBBS OFFICE

RECEIVED  
AUG - 6 1985  
C.D.D.  
HOBBS OFFICE