

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 43-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

N/A - 055564

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

ISLER-FEDLER

9. WELL NO.

1

10. FIELD AND POOL, OR WELLHEAD

MANY GATES ABO

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

SEC 31, 9-S, 30-E

12. COUNTY OR PARISH

CHAVES

13. STATE

NEW MEXICO

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—" for such proposals.)1. OIL ☒ GAS ☐ OTHER ☐
WELL WELL

2. NAME OF OPERATOR

EXXON CORPORATION

3. ADDRESS OF OPERATOR

P.O. BOX 1600, MIDLAND, TEXAS 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface

660 FT FROM NORTH LINE AND 660 FT FROM EAST
LINE, UNIT LETTER A, SEC. 31, 9-S, 30-E, CHAVES
COUNTY, NEW MEXICO

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, CR, etc.)

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐CHANGE OF OPERATOR ☒(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)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 perti-
nent to this work.)*THIS LEASE PREVIOUSLY OWNED BY JACK L. PHILLIPS
436 NORTH MAIN ST., GLADEWATER, TEXAS, 75647.
EFFECTIVE JULY 1, 1973

RECEIVED

AUG-81973

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

TITLE UNIT HEAD

DATE 7-27-73

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

AUG 1 1973
J. L. BECKMAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

RECEIVED

AUG 14 1973

D. B. C.
ARTESIA, OFFICE