

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: 660' ENL 1980' FEL OF SEC
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) ☐

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐
☐
☐

5. LEASE

NM-15016

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

WATTAM FEDERAL

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

CATO SAN ANDRES

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

SEC 6, 8S, 31E

12. COUNTY OR PARISH

CHAVES

13. STATE

NEW MEXICO

14. API NO.

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

4222' GR

(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.)

- PULL RODS AND TUBING. CIRC W/ MUD LADEN FLUID.
- SET CIBP AT 3650'. SPOT 35' EMT ON TOP OF PLUG.
- SPOT 20 SX CLASS "C" PLUG FROM 1068-1262'.
- SPOT 45 SX CLASS "C" PLUG FROM 400' TO SURFACE.
- INSTALL DRY HOLE MARKER. CLEAN AND LEVEL LOCATION.

APPROVED
PETER W. CHESTER

APR 9 1985

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED D. J. Lane TITLE SR. ADMIN. DATE 3-7-85

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 12 1985

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NOTICE OFFICE