

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 ☒ well gas ☐ well other ☐

2. NAME OF OPERATOR

EXXON CORPORATION

3. ADDRESS OF OPERATOR

P.O. Box 1600 MIDLAND, TEXAS 79702

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

AT SURFACE: 660' FWL AND 1980 FNL 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 ☐

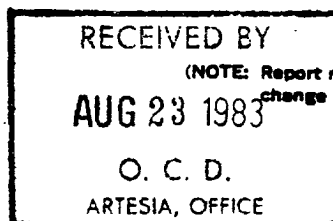
MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☒

(other) ☐

SUBSEQUENT REPORT OF:



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U.S. GEOLOGICAL SURVEY

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 PUMP AND RODS.

2. RUN IN HOLE W/TBG OPEN END TO 4080'. CIRC A 50 bbl SLUG OF CAUSTIC WTR. PREPARE TO SPOT CMT PLUGS.

3. SPOT CMT PLUG 4080-3840± 4/25 5X CL" 3% CACL2.

4. PULL TBG TO 3300± AND VERIFY TOP OF PLUG.

5. SPOT CMT PLUG FROM 1850'-1610±. VERIFY TOP OF CMT PLUG. TOP OF PLUG SHOULD BE MINIMUM OF 1750'.

6. SPOT 105X PLUG AT SURFACE.

7. CLEAN AND LEVEL LOCATION. INSTALL DRY HOLE MARKER

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

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

SIGNED

D. F. Lowe

TITLE

SR. ADMIN.

DATE

8-15-83

APPROVED BY

(ORIG. SGD.) DAVID R. GLASS

CONDITIONS OF APPROVAL IF ANY:

AUG 23 1983