

UNIT STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
NEW MEXICO CONS. COMMISSION
Drawer DD
Artesia, NM 88210

5. SE N. 14, 325	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME RECEIVED	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Priest Federal	
9. WELL NO. 1	
10. FIELD OR WILDCAT NAME Undesignated Callina (San Andres)	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7, T8S, R32E	
12. COUNTY OR PARISH Chaves	13. STATE NM
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD)	

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 <input checked="" type="checkbox"/> gas well <input type="checkbox"/> other <input type="checkbox"/>
2. NAME OF OPERATOR Exxon Corporation
3. ADDRESS OF OPERATOR Box 1600, Midland, TX 79702
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 660' FWL & 1,980' FNL 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	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>
(other)	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

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OCT 14 1981OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

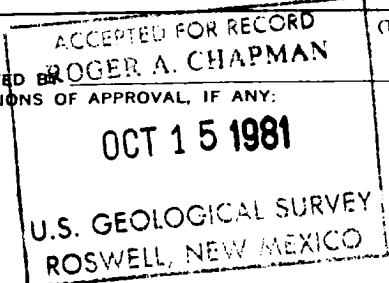
(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Drilled 7-7/8" hole to 4,310 TD.
Ran 4,294' (129 joints) 5-1/2" casing set at 4,305'. Cement w/1,400 sacks hallite cement, plus 250 sacks Class "C" cement, plug down 1:15 a.m. 8-21-81.
Test casing 8-28-81 w/1,500# - held OK.

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

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

SIGNED R. F. Lowe TITLE Sr. Administrator DATE 10-1-81APPROVED BY ROGER A. CHAPMAN (This space for Federal or State office use)
CONDITIONS OF APPROVAL, IF ANY: _____ TITLE _____ DATE _____

*See Instructions on Reverse Side