

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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| LAND OFFICE | |
| OPERATOR | |

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
E-2064

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

| | |
|--|---|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 7. Unit Agreement Name |
| 2. Name of Operator <u>EXXON CORPORATION</u> | 8. Farm or Lease Name <u>SOUTH FOUR LAKE UNIT</u> |
| 3. Address of Operator <u>P.O. Box 1600, MIDLAND, TEXAS 79702</u> | 9. Well No. <u>1</u> |
| 4. Location of Well UNIT LETTER <u>B</u> <u>660</u> FEET FROM THE <u>NORTH</u> LINE AND <u>1980</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>2</u> TOWNSHIP <u>12-S</u> RANGE <u>34E</u> NMPM. | 10. Field and Pool, or Wildcat <u>FOUR LAKES PENN.</u> |
| 15. Elevation (Show whether DF, RT, GR, etc.) <u>4160</u> | 12. County <u>LEA</u> |

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐ CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

1. PULL RODS, PUMP, AND TUBING.
2. RIH W/BRIDGE PLUG AND PACKER TO LOCATE CSG LEAK.
3. AFTER CSG LEAK IS REPAIRED RIH W/RETRIEVABLE PKR AND LATCH ON TO BP. MOVE BP DOWN TO 10270' AND PULL PKR TO 10,100' AND SET.
4. ACIDIZE W/6500 GAL DOWELL 15% HCL MSR 150, CONTAINING 2000 SCR N2 PER BBL. IN TWO STAGES.
5. PULL TREATING EQUIPMENT AND PLACE ON PUMP.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED D.H. Lowe TITLE SR. ADMIN. DATE 1-26-84

ORIGINAL SIGNED BY JERRY SEXTON
APPROVED BY DISTRICT 1 SUPERVISOR TITLE _____ DATE JAN 30 1984
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
JAN 30 1984
C.C.D.
HOBBS OFFICE