STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

| DISTRIBUTION | | |
|--------------|---|---|
| SANTA FE | | |
| FILE | | |
| U.S.G.S. | | I |
| LAND OFFICE | | |
| OPERATOR | T | Т |

CONDITIONS OF APPROVAL, IF ANYI

OIL CONSERVATION DIVISION

| DISTRIBUTION | 4 | P. O. BOX | 2088 | | , | Revised 19-1-78 |
|--|-------------------------------|----------------|------------------------------|---------------|----------------------|--|
| SANTA FE | SANTA | FE, NEW | MEXICO 87501 | | | |
| FILE | 4 | | | | Sa. Indicate Type | of Lease |
| U.S.O.S. | - | | | | State X | Fee 🔙 |
| LAND OFFICE | 4 | | | | 5. State Otl & Gas | Lease No. |
| OPERATOR | ال | | | • | V-1023 | |
| | | | | | mmm | mmm |
| SUNDR | RY NOTICES AND REP | ORTS ON | WELLS | 018. | | |
| TADIJANA" JEU | TON FOR PERMIT -" (FORM C- | 101) FOR SUCE | PROPOSALS.) | | | <i>"</i> |
| I. OIL V SAS | | | • | | 7. Unit Agreement | Name |
| OIL X WELL | OTHER- | | | | | |
| 2. Name of Operator | | | | | 8. Form or Lease | |
| Exxon Corporation | • | | | - | New Mexico | EI State |
| 3. Address of Operator | | | | | 9. Well No. | |
| . D. O. P 1600 M | :11 - 1 my 70700 | | | | 1 | |
| P. O. Box 1600, M: | <u>lalana, IX /9/02</u> | | | | 10. Field and Poo | . or Wildoot |
| - | | | | | | ennsylvanian |
| UNIT LETTER H | 1980 PEET PROM THE _ | North | LINE AND660 | PEET PROM | *********** | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ |
| _ | | | | | | |
| East Line, secti | 10N TOWNSHI | 13S | RANGE33E | НМРМ. | | |
| | | | | | | |
| | 15. Elevation (Si | tow whether i | DF, RT, GR, esc.) | | 12. County | MITTILL |
| | | 4223' GR | | • | Lea | |
| 16. | | | | 0.1 | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | Appropriate Box To I | ndicate N | _ | | | • |
| NOTICE OF II | NTENTION TO: | l | SUE | BSEQUENT | REPORT OF: | |
| | | | * | | | |
| PERFORM REMEDIAL WORK | PLUG AND A | BAHOOH [] | REMEDIAL WORK | | ALTERN | 16 CASING |
| TEMPORARILY ASAHOON | | | COMMENCE DRILLING OPHS. | . 🗇 | PLUG AN | D ABAHOOHMENT X |
| PULL OR ALTER CASING | CHANGE PLA | | CASING TEST AND CEMENT | | | |
| , | | | OTHER | | | . \square |
| | | . — | | | | |
| | | | | | | |
| 17, Describe Proposed or Completed O | perations (Clearly state all; | ertinent des | ils, and give pertinent date | es, including | estimated date of st | arting any proposed |
| work) SEE RULE 1103. | • | | | , | | : |
| | | | • | | 7 | |
| The following plug | gs were set 1-18 a | nd 1-19- | 85 to P & A the a | above wel | 1: | |
| | | | | | • | |
| | w/ 100 sx C1H | | <u> </u> | | | |
| 7480 - 7648 v | √/ 100 sx C1H | | • | | | |
| 5475 - 5650 v | w/ 100 sx C1H | | | • | | |
| 3900 - 4100 v | w/ 100 sx C1H | • | | | | |
| | w/ 50 sx C1H | | | | | • |
| 0 - 30 v | | | | | | |
| 0 - 30 V | v/ 10 SX CIH | | | | | |
| Cut off wallhood | | | | | • | |
| Cut off wellhead a | ma wera on ary ho | ie marke | r. | | | |
| | • | | | | | |
| | | • | | | • | |
| | | | | | | |
| | | | | • | | |
| | • | | • | | | |
| 1 | • | | | | | |
| • | | | | | | |
| | | | | | | |
| | | | | | | |
| 18. I hereby certify that the information | s should be to see and annual | 10 the 54 | (my knowledge and belief | | | |
| in a nervoy centry that the information | is time and combiets | TO THE DEST OF | . w.s. sunmenda une namer | | | |
| 2000 | . / | | . | | | |
| =16HED / Yella Tru | bling | TITLE | Unit Head | | DATE 1-30- | 85 |
| | 1 | | | | | |
| | | Oπ | 7 0 40 | | .1111 | 11 100- |
| and alltade | 4 . | TITLE | & GAS INSPI | CTOR | OATE DATE | - 11 1985 |
| THE PERSON OF TH | | | | | | |

RECEIVED

FEB -1 1985

O.C.D. HOBES OFFICE