

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-032233 (A)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Bowers "A" Federal

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Hobbs (G-SA)

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

Sec. 30, Township 18-S,
R-38-E (NMPM)

12. COUNTY OR PARISH

Lea

13. STATE

NM

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Exxon Corporation

3. ADDRESS OF OPERATOR

P. O. Box 1600, Midland, TX 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

Unit 0, 440' from South line and 330' from West line, Sec. 30,
T-18-S, R-38-E (NMPM)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3563

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Temporary Abandon

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form)

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. Set CIEP at 3900' w/65 sx cmt plug on top.
2. Well head intact.

RECEIVED
FEB 5 1980
U.S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

2/6/81

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

SIGNED

Mawin Ocho

TITLE

Unit Head

DATE 1-29-80

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

OFFICE OF THE ATTORNEY GENERAL

FEB 12 '80

RECEIVED