STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR	1	

CONDITIONS OF APPROVAL, IF ANY

OIL CONSERVATION DIVISION

Form C-103 .

	P. O. BO		Revised 10-1-78
SANTA FE	SANTA FE, NEW	MEXICO 87501	
FILE			5a. Indicate Type of Lease
U.S.G.S.			State X Fee
LAND OFFICE			5. State Oil & Gas Lease No.
OPERATOR			В-936
			mmmmm
SUNDR	Y NOTICES AND REPORTS ON	WELLS	
(DO NOT USE THIS FORM FOR PRO	POSALS TO DRILL OR TO DEEPEN OR PLUG B ON FOR PERMIT -" (FORM C-101) FOR SUC	ACK TO A DIFFERENT RESERVOIR. H PROPOSALS.}	
			7. Unit Agreement Name
1 OIL TO GAS [
MELL X MELL	OTHER-		8. Form of Lease Name
2. Name of Operator			
Exxon Corporation	•		New Mexico "BO" State
3. Address of Operator			9. Well No.
Pow 1600 Midland T	x 79702		8
Box 1600, Midland, TX 79702		10. Field and Book or Wildeat	
UNIT LETTER B 990 FEET FROM THE NOTTH LINE AND 1648 FEET FROM		Vacuum Glorieta	
UNIT LETTER B	FEET FROM THE NOTED	LINE ANDLU40 FEET FROM	Vacuum 41011212
East	12 TOWNSHIP 18-	-S RANGE 34-E NMPM	XIIIIIIIIX
THE CINE, SECTION			
mmmmmm ²	15. Elevation (Show whether	DF, RT, GR, etc.)	12. County
	3995 DF		Lea
	777777		
Theck	Appropriate Box To Indicate N	lature of Notice, Report or Ot	her Data
	ITENTION TO:		T REPORT OF:
NOTICE OF IN	TENTION TO:		
		ਚਿ	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPHS.	PLUG AND ABANDONMENT
FULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	_
		OTHER	
	. \square	<u> </u>	
OTHER			
15 Describe Described or Completed Or	peratione (Clearly state all pertinent det	ails, and give pertinent dates, includin	g estimated date of starting any proposed
work) SEE RULE 1103.	, ,		
• •			
 Pull rods and tul 	bing.		
2. Cleaned hole to			
	hot at 8711, 8690, 8434,	8/22 8/15	
3. Perf 42" csg 1-s	not at 6/11, 6090, 6434,	0422, 0413.	
-	34' and acidized perf $w/3$	BU DDIS 13% NEHCL acid.	
Pull tbg and pac	ker.		
6. Run tbg and rods	- place on pump.		
7. Tested well 11 d	ays prod 105 BO, 1355 BW		
/. lested well if d		•	
Tt 1 0/ 1	# med 15 BO 122 BU		
Final 24 hr. tes	t prod 15 BO, 122 BW.		
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Final 24 hr. tes	t prod 15 BO, 122 BW.		
	t prod 15 BO, 122 BW.	of my knowledge and belief.	· .
Final 24 hr. tes	t prod 15 BO, 122 BW.	of my knowledge and belief.	
	above is true and complete to the best		
	above is true and complete to the best		DATE 8-19-81
	above is true and complete to the best	of my knowledge and belief. r. Administrator	DATE 8-19-81
	above is true and complete to the best		8-19-81