

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

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E8181	

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Exxon Corporation Attn: David A. Murray		8. Farm or Lease Name New Mexico BP State
3. Address of Operator P. O. Box 1600, Midland, TX 79702		9. Well No. 3
4. Location of Well UNIT LETTER <u>K</u> <u>2275</u> FEET FROM THE <u>South</u> LINE AND <u>1969</u> FEET FROM THE <u>West</u> LINE, SECTION <u>7</u> TOWNSHIP <u>18S</u> RANGE <u>35E</u> NMPM.		10. Field and Pool, or Wildcat Vacuum Abo Reef
15. Elevation (Show whether DF, RT, GR, etc.) GR 3969		12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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 1103.

2-27-87, Perfed 8405-8438, 34 shots
3-2-87, Acidized perfs w/ 2856 gal of 15% HCL
3-27-87, 24 hr pump test: 19 BO, 167 BW, well FRW'd

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

SIGNED David A. Murray TITLE Permits Supervisor DATE 4-6-87
David A. Murray Signed by
Paul Knutz
Geologist
APPROVED BY _____ TITLE _____ DATE APR 1987