

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

5a. Indicate Type of Lease  
State ☐ Fee ☒  
5. State Oil & Gas Lease No.

**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 type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Dry	7. Unit Agreement Name
2. Name of Operator Exxon Corporation	8. Farm or Lease Name Samuel E. Cain
3. Address of Operator P. O. Box 1600, Midland, TX 79702	9. Well No. 5
4. Location of Well UNIT LETTER P 780 FEET FROM THE South LINE AND 780 FEET FROM East LINE, SECTION 24 TOWNSHIP 18S RANGE 38E NMPM.	10. Field and Pool, or Wildcat San Andres Undesig. East Hobbs-
15. Elevation (Show whether DF, RT, GR, etc.) 3619' GR	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"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <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.

The above well will be plugged and abandoned as follows:

4401 - 4580 w/ 40 sx C1C  
3750 - 4085 w/ 40 sx C1C  
Perf 1940, set rtmr. @ 1800'; pump 353 sx cmt. Circ. to surface.  
0 - 187 w/ 20 sx

Weld on dry hole marker.

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

SIGNED Melba Knippling TITLE Unit Head DATE 1-30-85  
ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE FEB - 4 1985  
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

FEB -1 1985

O.C.D.  
HOBBS OFFICE