OF UPIES RECEIVED	1		Form C-103 Supersedes Old
DISTRIBUTION	1		C-102 and C-103
ANTAFE	NEW ZXICO OIL CONSE	RVATION COMMISSION .	Effective 1-1-65
ILE	7	•	5a. Indicate Type of Lease
	7		State Fee
J.S.G.S.	-		1
AND OFFICE	┪ .		5. State Oil & Gas Lease No.
PERATOR			A-1320
	THE PERCENT ON	WELLS	
SUND (DO NOT USE THIS FORM FOR PUSE "APPLICA	RY NOTICES AND REPORTS ON ROPOSALS TO DRILL OR TO DEEPEN OR PLUG BATION FOR PERMIT - (FORM C-101) FOR SUC	WELLS ACK TO A DIFFERENT RESERVOIR. A PROPOSALS.)	7. Unit Agreement Name
OIL GAS WELL	OTHER-		8. Farm or Lease Name
. Name of Operator			NEW MEXICO'K STATE
Exxon Corporation			9. Well No.
. Address of Operator			3
P.O. Box 1600, Midland, Texas 79702			10. Field and Pool, or Wildcat
Location of Well			
T	1980 FEET FROM THE SOUT	H LINE AND 1980 FEET FROM	VACUUM (GX. S. It.
EAST	TION _ 2 8 TOWNSHIP	RANGE 35-E NMPM	
THE LINE, SEC			
mmmm	15. Elevation (Show whether	DF, RT, GR, etc.)	12. County
	3953 G		Lea
			ther Data
Chec	k Appropriate Box To Indicate N	vature of Notice, Report of O	IT REPORT OF:
NOTICE OF	INTENTION TO:	SUBSEQUEN	T REFORT OF
		· —	ALTERING CASING
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	
		COMMENCE DRILLING OPNS.	PLUG AND ADANDONMENT
TEMPORARILY ASANDON	CHANGE PLANS	CASING TEST AND CEMENT JOB	- 1 I-
PULL OR ALTER CASING		OTHER CSG LEAK	SURVEY
		-	-
OTHER		1	antimated date of starting any proposed
17. Describe Proposed or Completed	d Operations (Clearly state all pertinent de	tails, and give pertinent dates, including	ig estimated date of stations and pro-
work) SEE RULE 1103.			
1. Clean out cel	lar to surface casing.		
I. Grean out cer	. 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
: .11 114	ion line from 3//	surface casing to abov	e ground level with
2. Install bleed	der line from 10 3/4		
control valve	e at surface.		
		intermediate casing to	above ground level with
Install bleed	der line from 15/8	- Intermediate casing to	
control valve	at surface.		
	•		
		·	
			•
			·
		at of my knowledge and belief.	
. 18. I hereby certify that the inform	nation above is true and complete to the bea	·· •	
A LA A A	,	17 i n. 17 n. i	DATE 2-3-77
DX CU	mmh title_	Unit Head	DATE A V
SIGNED /	78. 2 · 70 ·		FEB 17 1977
 -			LEDIC MI
	TITLE		DATE

CONDITIONS OF APPROVAL, IF ANY:

FEET SOTT COMM.