

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

5a. Indicate Type of Lease	
State ☒	Fee ☐
5. State Oil & Gas Lease No.	
B-936	

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. ☒ OIL WELL ☐ GAS WELL ☐ OTHER-		7. Unit Agreement Name
2. Name of Operator Exxon Corporation		8. Farm or Lease Name New Mexico "CQ" State
3. Address of Operator P. O. Box 1600, Midland, TX 79702		9. Well No. 1
4. Location of Well UNIT LETTER <u>D</u> <u>660</u> FEET FROM THE <u>N</u> LINE AND <u>660</u> FEET FROM THE <u>W</u> LINE, SECTION <u>22</u> TOWNSHIP <u>17-S</u> RANGE <u>34-E</u> N. 40M.		10. Field and Pool, or Wildcat Vacuum ABO/North
15. Elevation (Show whether DF, RT, GR, etc.) 4048 GR		12. County Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER <u>Repair water flow & acid wash perf.</u> ☒	CASING TEST AND CEMENT JOBS ☐	

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 1703.

1. Pull production equipment.
2. TOC calculated to be at 6060'.
3. Run ret BP and set approx 50' below TOC.
4. Dump 5' 20-40 sand on top of BP.
5. Perf w/2 SPF. 100' above TOC. Set retainer 25' above perf.
6. Cmt w/approx. 1330 sxs.
7. If cmt does not circ to surface, run a TS to determine TOC. If TOC is not above surface csg, a supplementary procedure will be issued.
8. Drill cmt ret and cmt to top of sand above BP, and test csg to 1000 psi.
9. Flush out sand and pull BP.
10. Clean hole to 8910. Set PKR at 8890. Acidize perms w/2500 gal. 15% HCL acid.
11. Pull treating equipment and place on pump.

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

SIGNED Maxwin Ocho TITLE Unit Head DATE 4-15-80

Orig. Signed by

Jerry Sexton

APPROVED BY Dist 1, Supv.

CONDITIONS OF APPROVAL, IF ANY:

APR 18 1980

DATE