

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.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator <u>EXXON CORPORATION</u>	8. Farm or Lease Name <u>CHARLES S. ALVES</u>
3. Address of Operator <u>Box 1600, MIDLAND, TEXAS 79702</u>	9. Well No. <u>3</u>
4. Location of Well UNIT LETTER <u>C</u> <u>646</u> FEET FROM THE <u>NORTH</u> LINE AND <u>1964</u> FEET FROM THE <u>WEST</u> LINE, SECTION <u>7</u> TOWNSHIP <u>19-S</u> RANGE <u>35-E</u> NMPM.	10. Field and Pool, or Wildcat <u>SHAR BONE SPRING</u>
15. Elevation (Show whether DF, RT, GR, etc.)	12. County <u>LEA</u>

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 type="checkbox"/>	REMEDIAL WORK <input checked="" 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 JOB <input type="checkbox"/>	OTHER <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.

1. PULLED RODS AND PUMP.
2. ACIDIZED PERFS 10098-10136 W/4000 GAL 15% HCL.
3. PLACE ON PUMP.
4. TESTED FOR 6-DAYS - FINAL TEST. PROD 7880 PLUS 21 BW.

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

SIGNED A. F. Lomas TITLE SR ADMIN DATE 9-4-84

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT SUPERVISOR DATE 9-4-84

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

SEP 5 1984

HOBBS OFFICE