

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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 EXXON CORPORATION	8. Form or Lease Name NEW MEXICO ODD STATE
3. Address of Operator P.O. Box 1600, MIDLAND, TEXAS 79702	9. Well No. 2
4. Location of Well UNIT LETTER E 1980 FEET FROM THE NORTH LINE AND 1660 FEET FROM THE WEST LINE, SECTION 4 TOWNSHIP 19-S RANGE 35-E NMPM.	10. Field and Pool, or WHcat SCHARB WOLF CAMP
15. Elevation (Show whether DF, RT, GR, etc.) 3917	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 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 JOBS <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 PRODUCTION EQUIPMENT.
2. CLEANED OUT HILL TO 10798'
3. ACIDIZED PERFS 10544-10682, PLUS ON 10682-10798' w/10.500 GAL 15% HCL ACID.
4. PLACED WELL ON PLUMD - TESTED WELL 10 DAYS, - FINAL TEST 76 BO PLUS 44 BW

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

SIGNED J. A. Lowe TITLE SR ADMIN. DATE 4-2-84

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE _____ DATE APR 9 1984

CONDITIONS OF APPROVAL, IF ANY: