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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 <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No. A-4096 | |

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 checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- | | 7. Unit Agreement Name --- |
| 2. Name of Operator Exxon Corporation | | 8. Farm or Lease Name New Mexico DD State |
| 3. Address of Operator P. O. Box 1600, Midland, TX 79702 | | 9. Well No. 5 |
| 4. Location of Well UNIT LETTER <u>D</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>4</u> TOWNSHIP <u>19S</u> RANGE <u>35E</u> NMPM. | | 10. Field and Pool, or Wildcat Undesig. Scharb |
| 15. Elevation (Show whether DF, RT, GR, etc.) 3917' GR | | 12. County Lea |

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

NOTICE OF INTENTION TO:

| | |
|--|---|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | OTHER <input type="checkbox"/> |

SUBSEQUENT REPORT OF:

| | |
|---|---|
| REMEDIAL WORK <input checked="" type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG AND ABANDONMENT <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.

POH w/ rods and tubing. Pump 560 bbls. 3% KCl wtr. Set cmt. rtnr. @ 9304', pump 150 sx ClH cmt. in perms @ 9372 - 9686. Failed to sqz. RIH w/ EZ drl. rtnr. @ 9273'. Pump 200 sx ClH. Drl. out to 9560'. Test csg. to 500#. RIH w/ tbgr., test to 5000#. Set pkr. @ 9403', test to 500#. Perf 9520 - 9550' w/ 120 shots. Swab. Acdz/ w/1550 gals. 15% HCl. Set pkr. @ 9340'. Swab. RIH w/ 2-1/2 x 1-1/2" pump. Pump test. First prod. on 7-22-84. IP test on 8-1-84 w/ 9 bbls. oil and 8 bbls. wtr.

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

SIGNED Melba Knipling TITLE Unit Head DATE 8-29-84

APPROVED BY ORIGINAL SIGNED BY JERRY EFTON TITLE DISTRICT SUPERVISOR DATE SEP 6 1984
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

SEP 4 1984

O.C.D.
HOBBS OFFICE