

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-78

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.
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. ☒ OIL WELL ☐ GAS WELL ☐ OTHER-	7. Unit Agreement Name
2. Name of Operator Exxon Corporation	8. Form or Lease Name NEW MEXICO "D" STATE
3. Address of Operator P.O. Box 1600, Midland, Texas 79702	9. Well No. 6
4. Location of Well UNIT LETTER <u>G</u> <u>1980</u> FEET FROM THE <u>NORTH</u> LINE AND <u>1980</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>4</u> TOWNSHIP <u>19S</u> RANGE <u>35E</u> NMPM.	10. Field and Pool, or Whidat <u>Wharf Bone Spring</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3923 GR</u>	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 ☒	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	
OTHER ☐		OTHER ☐	

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. SET C.I.B.P AT 9196' - CAP W/35' CMT.
3. RUN TBB TO 8550', CIRC WELL W/3% NE KCL WTR. SPOT 600 GAL INHIBITED 1 1/2% NE AETIC.
4. PERF 5 1/2" LOG 8150-8515 W/23 PF.
5. ACIDIZE PERFS 8150-8515 W/13400 GAL 15% NEFE HCL
6. TEST WELL.

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

SIGNED J. P. Lowe TITLE SR Administrator DATE 10-16-85

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

APPROVED BY _____ DATE OCT 23 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

OCT 22 1985

O.C.D.
HOBBS OFFICE