Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, minerals and Natural Resources Department

Form C	-103
Revised	1-1-8

DISTRICT!	OIL CONSERVATION	ON DIVISION	WELL API NO.
P.O. Box 1980, Hobbs, NM 88240	P.O. Box 2088		30-025-30553
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico	87504-2088	5. Indicate Type of Lease STATE FEE
DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410			6. State Oil & Gas Lease No.
CHAIDDY MOT	CEC AND DEPORTS ON INC	116	VIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
(DO NOT USE THIS FORM FOR PRODEFFERENT RESERVE	CES AND REPORTS ON WE PPOSALS TO DRILL OR TO DEEPER RVOIR. USE "APPLICATION FOR PE 101) FOR SUCH PROPOSALS.)	N OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
1. Type of Well: Oil GAS WELL WELL WELL	OTHER DRY		New Maying EV State
2. Name of Operator	OHER DRI		New Mexico FK State
Exxon Corporation			1
3. Address of Operator P.O. Box 1600, Mi	dland, TX 79702		9. Pool name or Wildcat Humble City Strawn
4. Well Location Unit Letter A : 710	Feet From The North	Line and 570	Foot From The East Line
22	179	37F	Feet From The Line Lea
Section	Township R 10. Elevation (Show whether	ange j	NMPM County
	3733.7 GR		
NOTICE OF INT	Appropriate Box to Indicate		eport, or Other Data SEQUENT REPORT OF:
	<u> </u>		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	X
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB L
OTHER:		OTHER:	
 12. 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. 5-8-89 TD 17 1/2" hole at 503'. RU & run 12 jts of 13 3/8"/54.5#/K55/STC and set at 503'. Cmt. to surface w/ 525 sx CLC. Test casing and BOPs to 1000# - OK. 5-14-89 TD intermediate hole at 4500'. RU & run 104 jts of 8 5/8"/32#/K55/STC. Set at 4500'. Cmt. to surface w/ 1400 sx CLC. 5-15-89 Finish NU and test BOPs to 2000# OK 			
I hereby certify that the information pove is true SEGNATURE TYPE OR PRINT NAME Stephen			tive Specialist 8-11-89 TELEPHONE NO.
	Y HERRY SEXTON		
(This space for State Use) NAL SIGNED TO DISTRICT 1 S	UPERVISOR		AUG 1 4 1989

RECEIVED

AUG 14 1989

OCD HOBBS OFFICE