

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1780, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P O. Box 2088
Santa Fe, New Mexico 87504-2088

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" (FORMC-101) FOR SUCH PROPOSALS.)		WELL API NO. 3002506307
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		3. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator EXXON CORPORATION		6. State Oil & Gas Lease No. B-935
3. Address of Operator ATTN: REGULATORY AFFAIRS ML#14 P. O. BOX 1600 MIDLAND, TX 79702		7. Lease Name or Unit Agreement Name EXXON AGGIE STATE
4. Well Location Unit Letter H : 1980 Feet From The NORTH Line and 660' Feet From The EAST Line Section 31 Township 20S Range 37E NMPM LEA County		8. Well No. 12
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3544 DF		9. Pool name or Wildcat EUMONT YATES 7 RVRS QN (PRO GAS)

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER **AMEND C-101 DATED 07/10/95** ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG & ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
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.

AMEND C-101, DATED 07/10/95. OVERALL NEW PERFS. 2725'-3215' WILL BE FRACKED W/APPROX. 45000 GAL. + 225000 # SD. ADD ADDITIONAL PERFS. IN QUEEN FROM APPROX. 3315'-3510', FRAC. APPROX. 38000 GAL. + 140000 # SD.

THE C-101, DATED 07/10/95 WAS SUBMITTED IN A PACKAGE WITH WELL NOS. 4, 7, 12 AND 13.

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

SIGNATURE  TITLE Sr. Regulatory Specialist DATE 08/04/95

TYPE OR PRINT NAME Alex M. Correa (915) 688-6782 TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

AUG 14 1995