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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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. Farm or Lease Name F.F. HARDISON "B"
3. Address of Operator P.O. BOX 1600, MIDLAND, TEXAS 79701	9. Well No. 6
4. Location of Well UNIT LETTER J 1980 FEET FROM THE SOUTH LINE AND 1980 FEET FROM THE EAST LINE, SECTION 27 TOWNSHIP 21-S RANGE 37-E NMPM.	10. Field and Pool, or Wildcat DRINKARD
15. Elevation (Show whether DF, RT, GR, etc.) DF-3410	12. County LEA

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUESEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input 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 PERF. & FRAC ADDITIONAL DRINKARD <input checked="" 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.

KILL WELL AND PULL TBG OUT OF HOLE. RUN A GR/N LOG AND COLLAR LOCATOR FROM 6575 TO 3800'. PERFORATE THE INTERVALS PICKED BY GEOLOGIST WITH A JET CASING GUN. USE LUBRICATOR WHEN PERFORATING. RUN A RETRIEVABLE BRIDGE PLUG AND TREATING PACKER ON 2 7/8" WORKSTRING. A SUPPLEMENTAL PROCEDURE WILL BE PREPARED TO ACID FRAC THE NEWLY PERFORATED INTERVAL.

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

SIGNED D L Clemmer TITLE UNIT HEAD DATE 1-12-76

APPROVED BY [Signature] TITLE [Signature] DATE [Signature]
CONDITIONS OF APPROVAL, IF ANY: