

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 1980, 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

WELL API NO.	30-025-28639
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	B-025
7. Lease Name or Unit Agreement Name	E. Gamma Ridge State Com.
8. Well No.	1
9. Pool name or Wildcat	E. Gamma Ridge (Morrow)
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3544 GR

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. Type of Well:	OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER
2. Name of Operator	Exxon Corporation
3. Address of Operator	P.O. Box 1600, Midland, TX 79702
4. Well Location	Unit Letter <u>K</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line Section <u>11</u> Township <u>22S</u> Range <u>34E</u> NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3544 GR

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" 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"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

3-3-89 Perf 12743 - 12749
3-4 thru 3-7 SI
3-8 RU coil tbg unit and begin going in hole. Shut down and splice tbg.
3-9 Unload hole w/ coiled tbg.
3-10 Put well on line. After 10 minutes pressures equalized and well would no longer sell gas.
3-11 thru 3-14 SI well and change plate to 3/4".
3-15 Shot fluid level and ran BHP.
3-16 Put well on line untill pressure equalized, then SI.
3-17 thru 3-29 SI
3-30 RU flare line
3-31 thru 4-7 Flaring
4-8 thru 5-19 SI, 5-20 thru 6-4 install comperssor and test.
6-5-89 708 KCF/D, 210 FTP, 660# Discharge.

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

SIGNATURE Stephen Johnson TITLE Administrative Specialist DATE 6-7-89

TYPE OR PRINT NAME Stephen Johnson (915) 688-7548 TELEPHONE NO.

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JUN 12 1989

12/20/88

JUN 9 1989

OCD
ROBERT DEER