

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. 3002504765
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-935
7. Lease Name or Unit Agreement Name NEW MEXICO G STATE
8. Well No. 9
9. Pool name or Wildcat EUMONT YATES 7 RVRS GN (PRO GAS)

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.)	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator EXXON CORPORATION	
3. Address of Operator ATTN: REGULATORY AFFAIRS ML#14 P. O. BOX 1600 MIDLAND, TX 79702	
4. Well Location Unit Letter 0 : 1980 Feet From The FNL Line and 1980 Feet From The FEL Line Section 23 Township 21S Range 36E NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3542 (13' ABOVE GL)	

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: ☐

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.

08/19/96 MIRU
08/20/96 OPEN WELL UP. RIH W/ 2 3/8 TBG AND TAGGED CIBP @2813. CIRCULAT 61 BBLS MUD. PUMPED 25SX OF CLASS C CMT FROM 2813-2631. POH W/TBG. RIH W/ CIBP TO 1428' SET CIBP CIRCULATED 30 SX CLASS C CMT ON TOP OF PLUG FROM 1428- 1246. POH W/TBG. RU WIRELINE AND PERF THE CSG @ 36' (8 SHOTS) ESTABLISHED PUMP IN RATE OF 3 BPM/200# ND BOP. PUMPED 110 SX CLASS C CMT DOWN THE CSG AND OUT THE 5 1/2 X 8 5/8 ANNULUS TO SURFACE
08/25/96 CUT OF CASING 3' BELOW GRADE. WELDED ON PLATE AND MARKER

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

SIGNATURE Sharon B. Timlin TITLE Sr. Staff Office Assistant DATE 10/10/96

TYPE OR PRINT NAME Sharon B. Timlin (915) 688-6166 TELEPHONE NO.

(This space for State Use)

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: