State of New Mexico

Energy, Minerals and Natural Resources Department

Form C 101 Revised 1-1-89

State Lease -- 6 copies OIL CONSERVATION DIVISION Fee Lease -- 5 copies P.O. Box 2088 API NO. (assigned by OCD on New Wells) DISTRICT I Santa Fe, New Mexico 87504-2088 3002504781 P.O. Box 1980, Hobbs, NM 88240 5. Indicate Type of Lease DISTRICT II STATE X FEE P.O. Drawer DD, Artesia, NM 88210 6. State Oil & Gas Lease No. DISTRICT III B-935 1000 Rio Brazos Rd., Aztec, NM 87410 APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK 7. Lease Name or Unit Agreement Name la. Type of Work: RE-ENTER X DEEPEN PLUG BACK NEW MEXICO G STATE DRILL 1b. Type of Well: SINGLE X MULTIPLE GAS WELL OTHER __ WELL L 20NE 8. Well No. 2. Name of Operator **EXXON CORPORATION** 4 ATTN: REGULATORY AFFAIRS P. O. BOX 1600 MIDLAND, TX 79702 9. Pool name or Wildcat 3. Address of Operator **EUMONT YATES 7 RVRS QN (PRO GAS)** 4. Well Location Feet From The ____ 1980 Unit Letter G: 1980 Feet From The NORTH Line and NMPM LEA County Range 36E Township 21S Section 12. Rotary or C.T. Formation 10. Proposed Depth ROTARY YATES,7 RVRS, QN 3889 16. Approx. Date Work will start 15. Drilling Contractor 14. Kind & Status Plug. Bond 13. Elevations Show whether DF, RT, GR, etc.) UNKNOWN ASAP 3542' GR **BLANKET** PROPOSED CASING AND CEMENT PROGRAM SIZE OF CASING WEIGHT PER FOOT SETTING DEPTH SACKS OF CEMENT EST. TOP SIZE OF HOLE SURF. 75 322' 29.75 12 1/4 8 5/8" SURF 1350 <u> 3888'</u> 15.5, 14 7 7/8" 5 1/2 REENTER WELL, DRILL OUT PLUGS, PERF. 7 RVRS. THIS WELL WAS P&A 8-9-76. 3181'-3437', FRAC. APPROX. 41000 GAL. + 162000 # SD. ALSO, PERF YATES 2847'-3107', FRAC. APPROX. 41000 GAL. + 162000 # SD. ADMINISTRATIVE APPROVAL WILL BE REQUESTED FOR: - SIMULTANEOUS DEDICATION WITH #11 (REENTRY) & # 16 (ADD PERFS. AND CONVERT FROM OIL TO GAS) BOTH OF WHICH WILL BE IN OF HE SUMONT YAT 7 RVRS., QUEEN (PRO GAS) POOL. - A 320 AC. NON-STANDARD GAS PRORATION UNIT (N2 OF BEOPER NO. POOL CODE C-102 IS ATTACHED. EFF. DATE API NO.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY. I hereby certify that the information above is true and complete to the best of my knowledge and belief. arren TITLE Sr. Regulatory Specialist DATE 03/23/94 KEEY .915) 688-6782 TELEPHONE NO. TYPE OR PRINT NAME Alex M. Correa

(This space for State Use)

APPROVED BY _

Sahmit to Appropriate

District Office

ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE _

MAR 3 1 1994

BECEIVED

MAR 25 1994

- INCOS