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NEW MEXICO OIL CONSERVATION COMMISSION

Supersedes O-1
C-102 and C-103
Effective 1-1-75

SUMMARY NOTICES AND REPORTS ON WELLS DO NOT USE THIS FORM FOR WELLS TO BE PRODUCED IN A DIFFERENT RESERVOIR. USE THIS FORM FOR WELLS TO BE PRODUCED IN THE SAME RESERVOIR.		3a. Indicate Type of Lease State ☒ Fee ☐
		3. State Oil & Gas Lease No. B-935
		7. Unit Agreement No.
OIL WELL ☐ GAS WELL ☒ OTHER ☐ Name of Operator Exxon Corporation Address of Operator Box 1600, Midland, Texas 79702 Location of Well UNIT LETTER <u>M</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM <u>West</u> LINE, SECTION <u>26</u> TOWNSHIP <u>21</u> RANGE <u>36</u> NMPM.		6. Name of Lease Name New Mexico "G" State <i>By 2</i> 9. Well No. 6 10. Field and Pool, or Wildcat Eumont Gas
11. Elevation (Show whether DF, RT, or etc.) 3557		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: CORRECT REMEDIAL WORK ☐ EMERGENCY ABANDON ☐ WELL OR ALTER CASE ☐ OTHER ☐		SUBSEQUENT REPORT OF: PLUG AND ABANDON ☐ CHANGE PLANS ☐ OTHER ☐		REMEDIAL WORK ☒ COMMENCE DRILLING OPNS. ☐ CASING TEST AND CEMENT JOBS ☐ OTHER ☐		ALTERING CASING ☐ PLUG AND ABANDONMENT ☐	
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1. 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.

1. Pulled production equipment. Drilled out CIBP at 3270, and cleaned out to 3854'.
2. Set CIBP at 3810' w/3 sacks cmt on top.
3. Perf 5 1/2" CSG from 3084' to 3749' w/1 SPF, Total 33 shots.
4. Acidize perforations w/2600 gal 15% inhibited HCL Acid.
5. Foam sand frac. Perf from 3084 to 3749' w/7476 gal 2% KCL Wtr, 756,500 SCF N2, plus 64,670 lb. 20-40 sand.
6. 24 hr Flow Test Prod. 586 MCF. 9-11-79

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

SIGNED <u>C. J. Jackson</u>	TITLE <u>Unit Head</u>	DATE <u>9-11-79</u>
ORIG. SIGNED BY <u>Jer. Sexton</u>	TITLE <u>Dist. 1, Sec. 1</u>	DATE <u>SEP 14 1979</u>
APPROVED BY _____	TITLE _____	DATE _____
CONTINUATION OF APPROVAL, IF ANY		