

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 3002504786
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 & STATE 4194
8. Well No. 11
9. Pool name or Wildcat EUMONT YATES 7 RVRS QN (PRO GAS)
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3554' DF

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.)

Type of Well: OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>
Name of Operator EXXON CORPORATION
Address of Operator ATTN: REGULATORY AFFAIRS ML#14 P. O. BOX 1600 MIDLAND, TX 79702

Well Location Unit Letter E : 1980 Feet From The NORTH Line and 785 Feet From The WEST Line Section 26 Township 21S Range 36E NMPM LEA County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3554' DF

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
WELL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: INC. PRORATION UNIT, SIMO. DED <input checked="" type="checkbox"/>	OTHER: <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>

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.

ADMINISTRATIVE APPROVAL WILL BE REQUESTED FOR:
- 600 AC. NON-STANDARD GAS PRORATION UNIT IN THE EUMONT YATES 7 RVRS QN (PRO GAS) POOL.
- SIMULTANEOUS DEDICATION OF WELLS # 2, 4, 6, 10, 11 AND 16.
- UNORTHODOX LOCATION.

OFFSET OPERATORS HAVE BEEN NOTIFIED.

C-102 IS ATTACHED.

1/SP-1701 (SD) (L)

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

SIGNATURE **Alex M. Correa** TITLE **Sr. Regulatory Specialist** DATE **06/01/94**

TYPE OR PRINT NAME **Alex M. Correa** (915) 688-6782 TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE **SEP 16 1994**

CONDITIONS OF APPROVAL, IF ANY:

mp