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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-935

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- 2. Name of Operator Exxon Corporation 3. Address of Operator P. O. Box 1600, Midland, Texas 79701 4. Location of Well UNIT LETTER J 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 26 TOWNSHIP 21-S RANGE 36-E NMPM.	7. Unit Agreement Name 8. Farm or Lease Name N. M. "G" State 9. Well No. 15 10. Field and Pool, or Wildcat Eumont
15. Elevation (Show whether DF, RT, GR, etc.) 3552' D.F.	12. County Lea

16. 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 checked="" type="checkbox"/>	COMMENCE DRILLING OPNS. <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"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. 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.

This well was shut in during June, 1971 due to low oil production. Queen Gas recompletion potential will be evaluated, and recompletion or plugging will be initiated in 1976.

Expires 10/1/75

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u><i>Joe D. Jones</i></u>	TITLE <u>Unit Head</u>	DATE <u>10-24-74</u>
APPROVED BY <u>Joe D. Jones</u>	TITLE <u></u>	DATE <u></u>
CONDITIONS OF APPROVAL, IF ANY:		