

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. 3002504791
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. 16
9. Pool name or Wildcat EUMONT YATES 7 RVRS QN (PRO GAS)
10. Elevation (Show whether DF, RKB RT, GR, etc.) 3566' 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.)	
1. Type of Well: OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/> OTHER	2. Name of Operator EXXON CORPORATION
3. Address of Operator ATTN: REGULATORY AFFAIRS P. O. BOX 1600 MIDLAND, TX 79702	4. Well Location Unit Letter C : 660 Feet From The NORTH Line and 1980 Feet From The WEST Line Section 26 Township 21S Range 36E NMPM LEA County

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: **ADD PERFS.** ☒

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.

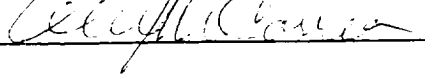
CONVERT FROM OIL TO GAS IN EUMONT YATES, 7 RVRS, QUEEN (PRO GAS) POOL BY ADDING PERFS. IN 7 RVRS FROM 3220'-3234' AND YATES FROM 2952'-3161', FRAC. BOTH WITH APPROX. 45000 GAL. + 180000 # SD.

ADMINISTRATIVE APPROVAL WILL BE REQUESTED FOR:

- **SIMULTANEOUS DEDICATION WITH # 4 & 11 WHICH ARE BEING REENTERED AND COMPLETED AS GAS WELLS IN EUMONT YATES, 7 RVRS, QUEEN (PRO GAS) POOL.**
- **A 320 AC. NON-STANDARD GAS PRORATION UNIT (N2 OF SEC. 26).**

C-102 IS ATTACHED.

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

SIGNATURE  TITLE **Sr. Regulatory Specialist** DATE **03/23/94**
TYPE OR PRINT NAME **Alex M. Correa** (915) 688-6782 TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE **DISTRICT I SUPERVISOR** DATE **MAR 31 1994**

CONDITIONS OF APPROVAL, IF ANY:

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Submit to Appropriate
District Office
State Lease-4 copies
Fee Lease-3 copies

State of New Mexico
Geology, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

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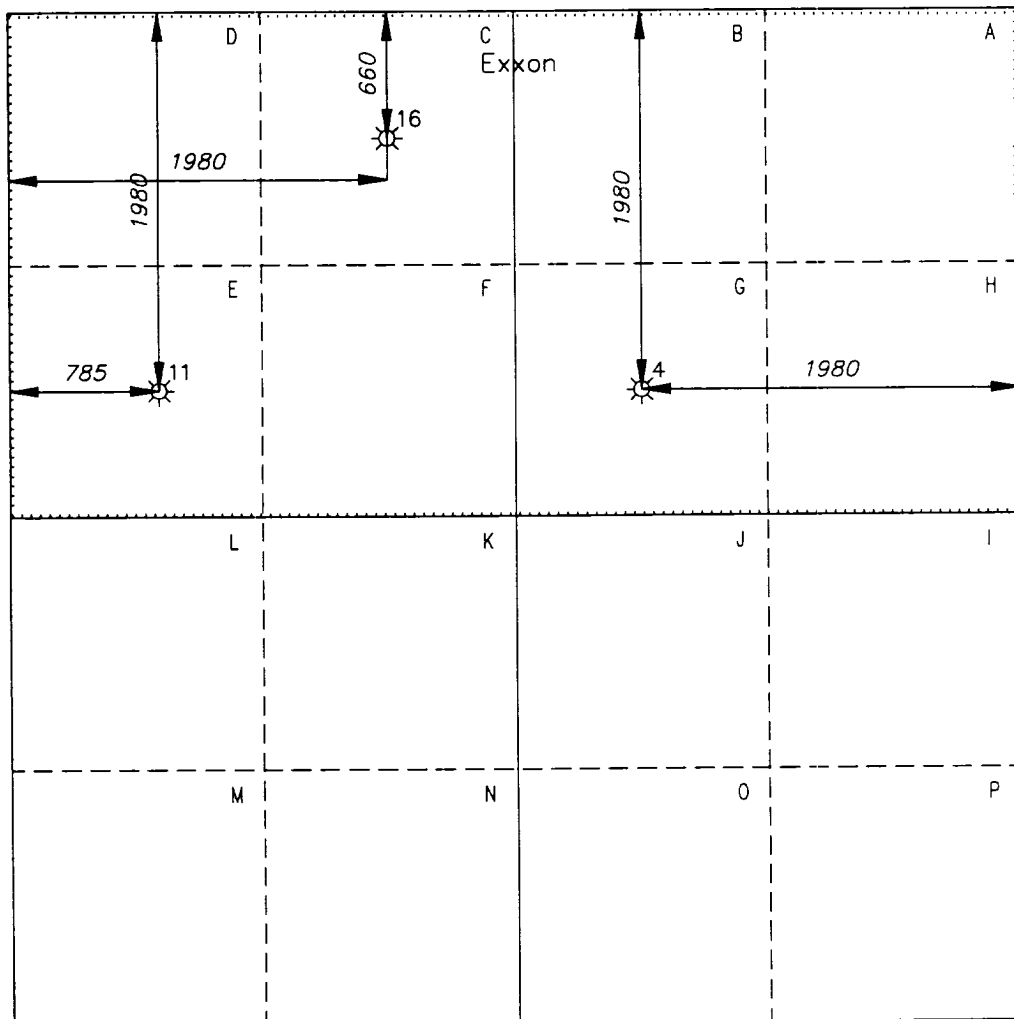
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WELL LOCATION AND ACREAGE DEDICATION PLAT

All distances must be from the outer boundaries of the Section.

Operator Exxon Corporation			Lease NEW MEXICO "G" STATE		Well No. 16
Unit Letter C	Section 26	Township 21-S	Range 36-E NMPM	County LEA	
Actual Footage Location of Well: 660 feet from the NORTH line and 1980 feet from the WEST line.					
Ground level Elev. 3566 DF	Producing Formation YATES, 7 RVRS, QUEEN		Pool EUMONT YATES 7 RVRS QN (PRO GAS)		Dedicated Acreage: 320 Acres

- Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc?
☐ Yes ☐ No If answer is "yes", type of consolidation _____
If answer is "no", list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____
No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature

C. H. Harper

Printed Name

C. H. HARPER

Position

PERMITS SUPERVISOR

Company

Exxon Corporation

P.O. Box 1600-Midland, Tx.-79702

Date

3/14/94

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

4-23-58

Signature & Seal of
Professional Surveyor

Certificate No.

RECEIVED

MAR 25 1994

**OCD HUBBS
OFFICE**