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U.S.G.S.

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 ☐Fee ☒

5. State Oil & Gas Lease No.

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 ☒GAS WELL ☐

OTHER-

2. Name of Operator

EXXON CORPORATION

3. Address of Operator

P.O. BOX 1600, MIDLAND, TEXAS 79701

4. Location of Well

UNIT LETTER A 330 FEET FROM THE N LINE AND 990 FEET FROMTHE E LINE, SECTION 10 TOWNSHIP 21-S RANGE 36-E NMPM.

7. Unit Agreement Name

8. Farm or Lease Name

JOHN D. KNOX

9. Well No.

9

10. Field and Pool, or Wildcat

OIL CENTER BLUEBRY

15. Elevation (Show whether DF, RT, GR, etc.)

3571 DF

12. County

LEA

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐TEMPORARILY ABANDON ☐PULL OR ALTER CASING ☐OTHER ☐PLUG AND ABANDON ☐CHANGE PLANS ☐☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐COMMENCE DRILLING OPNS. ☐CASING TEST AND CEMENT JOB ☐OTHER ☐ALTERING CASING ☐PLUG AND ABANDONMENT ☐PERFORATE ☒

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.

MIRL BARBER WELL SERVICE 4-30-73, PULL RODS + TBG, PERF. 4 1/2" CSC WITH 1 SHOT/FT AT 5834.42, 5846-52, 5855-65. ACIDIZED PERFS 5834-5865 WITH 5000 GALS 15% HCl, MAX PRESS 3350#A, INSTANT SHUT IN PRESS 1300#, 5 MIN. O.H. RAN PUMP + RODS 5-2-73, WELL FAILED TO PUMP. RIGGED UP BARBER WELL SERV. 5-7-73, PULLED PUMP, FOUND PLUGGED W/BENZOIC ACID FLAKES. RAN SWAB 5 HRS RECD 27 BLW AND 6 BO. RAN PUMP AND RODS. RRR 5-7-73. 24 HR POTENTIAL TEST RECD 22 BO, 38LW. F.R.W. 5-12-73

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

SIGNED

TITLE

UNIT HEAD

DATE

6-27-73

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: