

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

|                        |  |
|------------------------|--|
| NO. OF COPIES RECEIVED |  |
| DISTRIBUTION           |  |
| SANTA FE               |  |
| FILE                   |  |
| U.S.G.S.               |  |
| LAND OFFICE            |  |
| OPERATOR               |  |

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                                |   |
|--------------------------------|---|
| 5a. Indicate Type of Lease     |   |
| State <input type="checkbox"/> | Fee <input checked="" type="checkbox"/> |
| 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>                        | 7. Unit Agreement Name                               |
| 2. Name of Operator<br>Exxon Corporation  | 8. Farm or Lease Name<br>Blinbry Oil Com #1          |
| 3. Address of Operator<br>P. O. Box 1600, Midland, TX 79702   | 9. Well No.<br>1                                     |
| 4. Location of Well<br>UNIT LETTER C 330 FEET FROM THE N LINE AND 2310 FEET FROM<br>THE W LINE, SECTION 10 TOWNSHIP 21S RANGE 36E NMPM. | 10. Field and Pool, or Whitcat<br>Oil Center Blinbry |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>3583'  | 12. County<br>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"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input checked="" type="checkbox"/>   | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPS. <input type="checkbox"/>     | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOB <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 1703.

1. Pulled tbg and rods.
2. Cleaned out to 6147' w/bit & scraper.
3. Set PKR at 5811' - Acidize and scale inhib. Perfs 5906'-6110' w/3500 gal Inhib 15% HCl w/5% pentafox.
4. Pulled treating equipment.
5. Run pumping equipment.
6. Tested well five days. Last test well prod. 20 BO plus 15 BW.

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

SIGNED J. H. Sexton TITLE Sr. Administrator DATE March 30, 1983

APPROVED BY DISTRICT SUPERVISOR TITLE  DATE MAR 5 1983  
ORIGINAL SIGNED BY JERRY SEXTON  
CONDITIONS OF APPROVAL, IF ANY: