

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

88277
SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side.)

Form approved,
Budget Bureau No. 1004-0135
Expires August 31, 1985

LEASE DESIGNATION AND SERIAL NO.

LC-065455

6 IF INDIAN, ALLOTTEE OR TRIBE NAME

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—" 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 Exxon Corporation	8. FARM OR LEASE NAME Wantz Federal
3. ADDRESS OF OPERATOR P. O. Box 1600, Midland, TX 79702	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1650' FSL & 1980' FEL of Sec. (NW SE)	10. FIELD AND POOL Wantz - Abo
14. PERMIT NO. 30-025-29372	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3549' GR
	12. COUNTY OR PARISH Lea
	13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	Casing <input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

10-11-85: Set 5-1/2" K-55 csg. at 8001'. Cemented w/ 2100 bbls. HBL & 400 sx ClC. Circulated cement to surface. FRR 10-12-85.
Testing casing to 2000# on 11-17-85 - OK.

ACCEPTED FOR RECORD

SWR
FEB 13 1986

CARLSBAD, NEW MEXICO



18. I hereby certify that the foregoing is true and correct.

SIGNED

TITLE Unit Head

DATE 11-15-85

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
FEB 14 1986
O.C.C.
HOBBS OFFICE