

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

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-	7. Unit Agreement Name
2. Name of Operator EXXON CORPORATION	8. Form or Lease Name NEW MEXICO'S STATE
3. Address of Operator P.O. BOX 1600, MIDLAND, TEXAS 79702	9. Well No. 22
4. Location of Well UNIT LETTER <u>M</u> <u>800</u> FEET FROM THE <u>SOUTH</u> LINE AND <u>660</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>2</u> TOWNSHIP <u>22-S</u> RANGE <u>37-E</u> NMPM.	10. Field and Pool, or Whichever BLINEBRY
15. Elevation (Show whether DF, RT, GR, etc.) 3382	12. County LEA

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☒	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPER. ☐	PLUG AND ABANDONMENT ☐
FULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	

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 1102.

1. SWAB TEST FOR PRODUCTIVITY.
2. IF PRODUCTION IS NOT SATISFACTORY:
A) ACIDIZE w/1500 GAL 15% HCL.
3. SWAB TEST TO RECOVER LOSS AND CHECK PRODUCTIVITY.

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

SIGNED J.P. Sexton TITLE S.R. ADMIN. DATE 3-6-84

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR TITLE DATE MAR 13 1984

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
MAR 12 1984
J.C.O.
HUMAN RIGHTS OFFICE