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LAND OFFICE	
OPERATOR	

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 - 1" (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 EXXON CORPORATION	8. Farm or Lease Name J.L. GREENWOOD
3. Address of Operator Box 1600, MIDLAND, TEXAS 79702	9. Well No. 12
4. Location of Well UNIT LETTER <u>0</u> <u>660</u> FEET FROM THE <u>SOUTH</u> LINE AND <u>1880</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>9</u> TOWNSHIP <u>22-S</u> RANGE <u>37-E</u> NMPM.	10. Field and Pool, or Wildcat BROWNSON ELLENBURGER
15. Elevation (Show whether DF, RT, GR, etc.) 3424 D.F.	12. County LEA

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

PERFORM REMEDIAL WORK	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

PLUG AND ABANDON	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input checked="" type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>
CASING TEST AND CEMENT JOBS	<input type="checkbox"/>
OTHER	<input type="checkbox"/>
ALTERING CASING	<input type="checkbox"/>
PLUG AND ABANDONMENT	<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 1103.

1. PULLED TBG AND RODS.
2. SET PKR AT 7684. TEST CSG TO 500'.
3. ACIDIZE PERFS 7812-8073' w/16,000 GAL 15% NEHCL.
4. PLACE WELL ON PUMP.
5. TESTED FOR 5 DAYS. FINAL TEST PROD 9 BO PLUS 19 BW.

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

SIGNED L. F. Lowe TITLE SR ADMIN. DATE 8-31-84ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISORAPPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:TITLE _____ DATE SEP 6 1984