

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**  
**P O. Box 2088**  
**Santa Fe, New Mexico 87504-2088**

WELL API NO. <b>3002510251</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. <b>FEE</b>
7. Lease Name or Unit Agreement Name <b>N G PENROSE</b>
8. Well No. <b>2U</b>
9. Pool name or Wildcat <b>BLINEBRY OIL &amp; GAS (OIL)</b>
10. Elevation (Show whether DF, RKB, RT, GR, etc.)

**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" (FORMC-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator <b>EXXON CORPORATION</b>
3. Address of Operator <b>ATTN: REGULATORY AFFAIRS P.O. BOX 4358 HOUSTON, TX 77210</b>
4. Well Location Unit Letter <b>H</b> : <b>1980</b> Feet From The <b>NORTH</b> Line and <b>660</b> Feet From The <b>EAST</b> Line Section <b>13</b> Township <b>22S</b> Range <b>37E</b> NMPM <b>LEA</b> County 10. Elevation (Show whether DF, RKB, RT, GR, etc.)

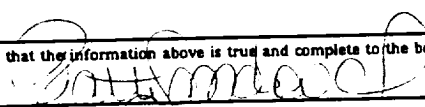
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  
**NOTICE OF INTENTION TO:** **SUBSEQUENT REPORT OF:**

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 OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

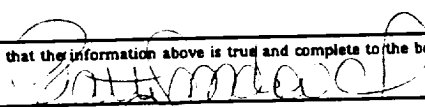
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

**2/16/98 MIRU,**  
**2/20/98 RELEASED RTBP FROM 5840'**  
**2/22/98 RDMO**  
**COMMINGLING DOWNHOLE (DHC R-8707)**

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

SIGNATURE  TITLE **Sr Staff Office Assistant** DATE **08/04/98**  
TYPE OR PRINT NAME **Patti Sandoval** (713) 431-1212 TELEPHONE NO.

(This space for State Use)

APPROVED BY  TITLE **Sr Staff Office Assistant** DATE **08/04/98**

CONDITIONS OF APPROVAL, IF ANY: