S OF OPIES RECEIVED					Form C-103
DISTRIBUTION				-	Supersedes Old C-102 and C-103
SANTA FE	NE\ XICO C	IL CONSERVA	TION COMMISSIC	N	Effective 1-1-65
FILE		•			
U.S.G.S.					5a. Indicate Type of Lease
LAND OFFICE					State X Fee
OPERATOR					5. State Oil & Gas Lease No.
					B-934
(DO NOT USE THIS FORM FOR PROPO USE "APPLICATION	NOTICES AND REPO	RTS ON WEL	A DIFFERENT RESER	VOIR.	
1.					7. Unit Agreement Name
OIL X GAS WELL	OTHER-				
2. Name of Operator					8. Farm or Lease Name
Exxon Corporation					New Mexico "S" State
3. Address of Operator					9. Well No.
Box 1600, Midland, TX	79701	• .			25
4. Location of Well	· · · · · · · · · · · · · · · · · · ·				10. Field and Pool, or Wildcat
UNIT LETTER <u>N</u> . 8	10	S	2130	FEET FROM	Drinkard
UNIT LETTER					
THE LINE, SECTION .	2	22-S	37-	E NUR	$\boldsymbol{\lambda} = \boldsymbol{\lambda} = $
THE LINE, SECTION _	TOWNSHIP				
15. Elevation (Show whether DF, RT, GR, etc.)					12. County
					Lea
<sup>16.</sup> Check An	propriate Box To In	dicate Natur	of Notice, Re	Port or Otl	net Data
NOTICE OF INT		1			REPORT OF:
NOTICE OF INT	ENTION TO:				
PERFORM REMEDIAL WORK	PLUG AND A8/	ANDON COL REM	EDIAL WORK	X	ALTERING CASING
		·1	MENCE DRILLING OPN	<u> </u>	PLUG AND ABANDONMENT
TEMPORARILY ABANDON	CHANGE PLAN		NG TEST AND CEMEN	<b>1</b>	La construction de la constructi
PULL OR ALTER CASING			THER		[ <sup></sup>
OTHER	<u></u>				
17. Describe Proposed or Completed Oper	ations (Clearly state all pe	ertinent details, a	nd give pertinent de	ates, including	estimated date of starting any propose

- 1. Run CIBP on wireline in Granite Wash (String 1) set at 7250', capped BP w/35' cmt.
- 2. Perf. Drinkard (String 1) from 6255 6486' w/53 shots.
- Acid Frac Drinkard 6255-6486 w/20,000 gals. polymulsion pad, 25,000 gals. 20% HCL and 3,000 gals.
- On 24 hr. potential test, well produced 1,600 Mcf/d on 20/64 choke, flowing pressure 620#. No Fluid.

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

 Signed

 Unit Head

 Office Riemod by

 Intrue

 Unit Head

 Office Riemod by

 Intrue

 TITLE

 Date

 Office Riemod by

 Intrue

 Date

 Date

CONDITIONS OF APPROVAL, IF ANY: