State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. P 0. Box 2088 DISTRICT II 3002520390 P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease STATE X **DISTRICT III** FEE 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. B-934 1000 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE 'APPLICATION FOR PERMIT' (FORMC-101) FOR SUCH PROPOSALS.) NEW MEXICO S STATE 1. Type of Well: OIL X OTHER 2. Name of Operator 8. Well No. **EXXON CORPORATION** 24K ATTN: REGULATORY AFFAIRS P. O. BOX 1600 3. Address of Operator 9. Pool name or Wildcat MIDLAND, BLINEBRY OIL 4. Well Location : 1650 Feet From The_ SOUTH 1980 Unit Letter J Line and **EAST** Feet From The Line Township 22S Range 37E LEA 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: REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDON ALTERING CASING PLUG & ABANDONMENT TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. PULL OR ALTER CASING CASING TEST AND CEMENT JOB OTHER: OTHER: SQZ OF DRINKARD PERFS 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. W/ 50 SX CLASS C CMT, TESTED TO #1000 HELD OK SQUEEZE (PERFS 6257 TO 6428) I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE Sr.staff office assistant DATE _06/01/92 TYPE OR PRINT NAME Sharon B. Timlin (915) 688-7509 TELEPHONE NO. (This space for State Use) ned by Paul Kautz Contogist JUN 04'92

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY_

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