OF OPIES RECEIVED		•		Form C-103	
DISTRIBUTION				Supersedes Old C+102 and C+103	
SANTA FE	NEW N JXIO	O OIL CONSE	RVATION COMMISSION	Effective 1-1-65	
FILE					
U.S.G.S.				5a. Indicate Type of	Ladse
LAND OFFICE				State 🔀	Fee
OPERATOR	-			5. State Cil & Gas L	
				B-93	' <i>4</i>
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.)				7. Unit Agreement N	
OIL GAS WELL WELL	OTHER-	•		7. Unit Adreement N	rante
2. Name of Operator				8. Farm or Lease No	
EXXON CORPORATION 3. Address of Operator				NEW MEXICO	'S" STATE
3. Address of Operator P. o. Box 1600	O KAIDI AND	TEXA	5 79701	9. Well No. 29	
	10. Field and Pool,				
UNIT LETTER	1700 FEET FROM TH	. SOUT	H LINE AND 660 FEET FE	DRINKARD &	WANTZ APO
THE WEST LINE, SE	ction town	15HIP 22-	S RANGE 37-E NM	PM.	
	15. Flevation	(Show whether I	DF, RT, GR, etc.)	12. County	777777
	//////	FILED		LEA	
Chec	ek Appropriate Box To FINTENTION TO:	o Indicate Na	ature of Notice, Report or subseque	Other Data ENT REPORT OF:	
			REMEDIAL WORK	ALTERING	
PERFORM REMEDIAL WORK	PLUG AN	D ABANDON			ABANDONMENT
TEMPORARILY ABANDON			COMMENCE DRILLING OPNS.	PLOU ARD	ABARDORMER!
PULL OR ALTER CASING	CHANGE	PLANS	CASING TEST AND CEMENT JOB		
		F	OTHER		
OTHER					
17. Describe Proposed or Completed	d Operations (Clearly state o	l nll pertinent deta	ils, and give pertinent dates, include	ling estimated date of sta	erting any proposed
work) SEE RULE 1103.	1 Operations (areas) orace			12 21 1/2	
123/1" HOL	F AT 12 NOC	N 5-22	0-76. FINISHEL	13 74 110	LE A
5POD 13/4 110-		/	POH RIG UP 4	PAN 28	TTS
8'30 Am 5-23-	.76. CIRC.	1 HR.	POH KI TI		~ <i>C</i> 171
103/11" CSG. SÉ	TAT 1/25.		W/100 SXS CLA	1/2.49	سر بسر و
	WT 13.5 # . 1	TAILED	W/100 5x5 CLA	55 6 4/27	2015
E.P. 600 PSI C	IRC 83 273		LING UP BOP'S A	ALD LINES.	TEST
	70 300 600	1000.	HELD OK. T	1H 10 10	30
Bop's = 02120ES	10 300 1200		ELTEN 1034" C	1/ 10 1000	0 (51,
	A K	PLUC	5 TO 1127'. D	BILLED O.	v.
DRILLED 75 0	F CMI AND	,	•		
•					
18. I hereby certify that the informa	ation above is true and comp	lete to the best (of my knowledge and belief.		
					4
SIGNED DX Clen	amer	,,,, <i>l</i>	wir HEAD	DATE 5-2	26-76
SIGNED ~		TITLE			
Dete	Sign at My			Elf m.	., 19
	r Santan			DATE	t
APPROVED BY		TITLE			
CONDITIONS OF APPROVAL, IF					