

## C. CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                        |  |
|------------------------|--|
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|                                                                                                      |
|------------------------------------------------------------------------------------------------------|
| 3a. Indicate Type of Lease<br>State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.<br>V-732                                                                |

## 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.)

|                                                                                                                                                                                                          |                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| 1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-                                                                                        | 7. Unit Agreement Name<br>---                            |
| 2. Name of Operator<br>Exxon Corporation                                                                                                                                                                 | 8. Farm or Lease Name<br>New Mexico DL State             |
| 3. Address of Operator<br>Post Office Box 1600, Midland, Texas 79702                                                                                                                                     | 9. Well No.<br>1                                         |
| 4. Location of well<br>UNIT LETTER <u>I</u> , <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM<br>THE <u>East</u> LINE, SECTION <u>18</u> TOWNSHIP <u>23S</u> RANGE <u>33E</u> NMPM. | 10. Field and Pool, or Wildcat<br>Wildcat (Bone Springs) |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>3705' GR                                                                                                                                                | 12. County<br>Lea                                        |

|                                                                              |                                                  |                                                     |                                               |
|------------------------------------------------------------------------------|--------------------------------------------------|-----------------------------------------------------|-----------------------------------------------|
| 16. 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 type="checkbox"/>              | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>                                 | CHANGE PLANS <input checked="" type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/>    | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>                                | OTHER <input type="checkbox"/>                   | CASING TEST AND CEMENT JOB <input type="checkbox"/> | OTHER <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.

Please amend the casing and cementing program to show that the top of cement on the 5 1/2" csg. string will be at 3,000'.

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

SIGNED Melba Kimpeling TITLE Unit Head DATE June 6, 1983  
ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JUN 20 1983

RECEIVED  
JUN 17 1983  
O.C.D.  
HOBBS OFFICE