

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Exxon Corporation	8. Form or Lease Name New Mexico DL State
3. Address of Operator P. O. Box 1600, Midland, Texas 79702	9. Well No. 4
4. Location of Well UNIT LETTER <u>N</u> <u>330</u> FEET FROM THE <u>South</u> LINE AND <u>2242</u> FEET FROM <u>West</u> <u>18</u> <u>23S</u> <u>33E</u> THE <u> </u> LINE, SECTION <u> </u> TOWNSHIP <u> </u> RANGE <u> </u> NMPM.	10. Field and Pool, or Whdcat Cruz-Delaware
15. Elevation (Show whether DF, RT, GR, etc.) 3701' GR	12. County 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"/>	PLUS AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUS AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" 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 1703.

4-9-84 Drlg at 5312' in 7 7/8" hole
4-11-84 Set 139 jts. 5 1/2", 15.5#, K-55 csg. at 5311'. Cmt. w/1700 sx Trinity Lite and 220 sx C1C. Cement not circulated to surface. TOC at 480'.
4-11-84 FRR at 1000 hrs.

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

SIGNED Melba Knippling TITLE Unit Head DATE May 22, 1984
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE MAY 25 1984
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
MAY 24 1984
O.C.D.
HOBBS OFFICE