

2018

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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.

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-	7. Unit Agreement Name
2. Name of Operator Shell Oil Company	8. Farm or Lease Name State B
3. Address of Operator P. O. Box 1509, Midland, Texas 79701	9. Well No. 1
4. Location of Well UNIT LETTER <u>D</u> <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>330</u> FEET FROM THE <u>West</u> LINE, SECTION <u>33</u> TOWNSHIP <u>18S</u> RANGE <u>38E</u> N.M.P.M.	10. Field and Pool, or Wildcat Hobbs (G-SA)
15. Elevation (Show whether DF, RT, GR, etc.) 3651 DF	12. County Lea

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 checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input 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.

1-26-74 to 1-28-74

1. Pulled rods, pump and tubing.
2. Set CIBP at 4035'.
3. Perforated at 4011, 4013, 4017, 4019, 4021 (5 holes).
4. Acidized 4011-4021 with 1400 gal 15% NEA.
5. Ran 128 jts 2" tubing, hung at 4030'. Ran 2" x 1 1/2" x 16' x 4' RWBC pump on 97 - 3/4" and 61 - 7/8" rods.
6. Placed on production.

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

SIGNED N. W. Harrison TITLE N. W. Harrison Staff Production Engineer DATE 2-14-74

APPROVED BY _____ TITLE _____ DATE FEB 18 1974

CONDITIONS OF APPROVAL, IF ANY: