

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-06580
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name NORTHEAST DRINKARD UNIT
8. Well No. 617
9. Pool name or Wildcat NORTH EUNICE BLINEBRY-TUBB- DRINKARD OIL & GAS

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. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER
2. Name of Operator SHELL WESTERN E&P INC.
3. Address of Operator P. O. BOX 576, HOUSTON, TX 77001 (WCK 4435)
4. Well Location Unit Letter <u>F</u> : <u>1980</u> Feet From The <u>NORTH</u> Line and <u>1980</u> Feet From The <u>WEST</u> Line Section <u>14</u> Township <u>21S</u> Range <u>37E</u> NMPM <u>LEA</u> County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3412' DF
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11. 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 type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: <u>Cmt sqzd, OAP & Acd</u> <input checked="" type="checkbox"/>	

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.

5-25 to 6-21-89:

POH w/prod equip. CO to 6563'. Set CIBP @ 5685' & pkr @ 5445'. Sqzd Blinebry perfs 5547' - 5653' w/200 sx Cls "C" cmt + .3% CF-1 followed by 175 sx Cls "C" cmt + 2% CaCl₂. Rel pkr & POH. DO cmt 5686' - 5685'. Pres tstd sqz to 500# for 15 min, held OK. DO CIBP @ 5685'. DO cmt 5695' - 6570'. CO fill 6571' - 95'. Perf'd Blinebry/Tubb/Drinkard 5696' - 6551' (1 JSPF). Acd perfs 6023 - 6551' & OH 6565' - 95' w/5250 gals 15% HCl + 1000# rock salt. Atmptd to acdz perfs 5866' - 5979' w/882 gals 15% HCl; perfs comm. Installed prod equip & ret'd to prod.

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

SIGNATURE J. H. Smitherman TITLE REGULATORY SUPV. DATE 7-7-89
 TYPE OR PRINT NAME J. H. SMITHERMAN (713) 870-3797 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

JUL 13 1989

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: