

to Appropriate District Office

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

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

WELL API NO.
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. 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.)

7. Lease Name or Unit Agreement Name State Section 3
8. Well No. 1
9. Pool name or Wildcat Eumont-Yates-7 Rivers- Queens

1. Type of Well:
OIL WELL GAS WELL OTHER

2. Name of Operator
SHELL WESTERN E & P INC. (4431 WCK)

3. Address of Operator
P.O. BOX 576, Houston, TX 77001-0576

4. Well Location
Unit Letter A : 660 Feet From The North Line and 990 Feet From The East Line
Section 3 Township 20-S Range 37-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3573' DF

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>TA</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.

2-16-89 thru 2-17-89:
CO to 3625'. Set CIBP @ 3610' and cap w/ 18' cmt.. Set CICR @ 3446' and pmp 75 sxs class "C" cmt + .3% Halad-9 to sqz perfs @ 3550' - 3580'. Circ hole w/ fresh water treated w/ Exxon 7720. Left well shut-in.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE J.A. Smith for W.F.N. KELLDORF TITLE STAFF PRODUCTION ENGINEER DATE APR 17 1989
TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR
APPROVED BY _____ TITLE _____ DATE APR 24 1989
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 21 1980

OCD
HOMES OFFICE

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.
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name
STATE SECTION 3
8. Well No. 1
9. Pool name or Wildcat EUMONT-YATES-7RIVERS-QUEENS
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3573' DF

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. (4431 WCK)
3. Address of Operator P.O. BOX 576, Houston, TX 77001-0576
4. Well Location Unit Letter <u>A</u> : <u>660</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>East</u> Line Section <u>3</u> Township <u>20-S</u> Range <u>37-E</u> NMPM <u>LEA</u> County

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <u>TA</u> <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input 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.

- CO to 3620'.
- Set CIBP @ 3610' and cap w/ 20' cmt.
- Set cmt retainer @ 3450'.
- Pmp 100 sxs class "C" cmt + .3% Halad-9.
- Pres test to 300 psi.
- Leave well TA'd.

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

SIGNATURE W.F.N. Kelldorf TITLE STAFF PRODUCTION ENGINEER DATE 3/15/89

TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT I SUPERVISOR DATE MAR 21 1989

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

MAR 20 1989

OCD
HOBBS OFFICE