

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. 30-025-06490
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 NORTHEAST DRINKARD UNIT
8. Well No. 314
9. Pool name or Wildcat N. EUNICE BLINEBRY-TUBB-DRINKARD

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 5237)	
4. Well Location Unit Letter U : 990 Feet From The WEST Line and 990 Feet From The SOUTH Line Section 2 Township 21S Range 37E NMMP LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3471' GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: CO & ACD ☒

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.

6-29 TO 7-05-94:

POH W/PROD EQMT. FOUND HEAVY SCALE ON TBG. TAG SCALE @ 5690' W/BIT & SCRPR. DRLED UP SCALE TO 5790'. CO TO 5910'. PU TBG TO 5800'. ACD OH 5812' - 5910' BY SPOTTING 1000 GAL 15% NEFE HCL @ END OF TBG. POH W/TBG. INST PROD EQMT & RTP.

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

SIGNATURE J. Marcus Winder TITLE MGR - ASSET ADMIN. DATE 2/23/95

TYPE OR PRINT NAME G. S. NADY TELEPHONE NO. 713/544-3797

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

803 01 1005

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

(This space for State Use)

JERRY SEXTON  
SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

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

WELL API NO. 30-025-06490
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-9745

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	7. Lease Name or Unit Agreement Name NORTHEAST DRINKARD UNIT
2. Name of Operator Shell Western E&P Inc.	8. Well No. 314
3. Address of Operator P.O. Box 576 Houston, TX 77001-0576 (WCK 4435)	9. Pool name or Wildcat N. EUNICE BLINEBRY-TUBB-DRNKRD

4. Well Location Unit Letter U : 990 Feet From The WEST Line and 990 Feet From The SOUTH Line Section 2 Township 21S Range 37E NMPM LEA County
--

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3471' GR

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: <input 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.

THIS IS 'CHANGE OF PLANS' TO THAT WHICH WAS PREVIOUSLY APPROVED VIA FORM C-103 ON 2/27/90.

1. POH W/PROD EQUIP.
2. CO TO TD @ 5910'.
3. PERF BLINEBRY 5777' - 5800' (2 SPF).
4. ACDZ BLINEBRY PERFS 5654' - 5800' & OH (5812' - 5910') W/5754 GALS (137 BBLS)  
15% NEFE HCL + 500# ROCK SALT.
5. INST PROD EQUIP & RET WELL 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 5/14/91  
TYPE OR PRINT NAME J. H. SMITHERMAN TELEPHONE NO. 713/870-3797

(This space for State Use) ORIGINAL

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

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Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-06490
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	B-9745
7. Lease Name or Unit Agreement Name	NORTHEAST DRINKARD UNIT
8. Well No.	314
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 <input type="checkbox"/>
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>U</u> : <u>990</u> Feet From The <u>WEST</u> Line and <u>990</u> Feet From The <u>SOUTH</u> Line

Section <u>2</u>	Township <u>21S</u>	Range <u>37E</u>	NMPM	LEA	County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>3471' GR</u>					

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"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <u>Cmt sqz &amp; Acdz</u> <input checked="" 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.

1. POH w/prod equip. Tag btm.
2. CO to TD (5910').
3. Set CIBP @ 5780' & pkr @ 5600'.
4. Sqz Blinbry perms 5654' - 5759' w/75 sx Cls "C" cmt + .3% CF-1 followed by 50 sx Cls "C" cmt + 2% CaCl<sub>2</sub>. Rel pkr & POH.
5. DO cmt to CIBP @ 5780'. PT sqz to 300#.
6. KO CIBP & push to btm.
7. Acdz Blinbry OH w/2100 gals 15% NEFE HCl + 750# rock salt.
8. Install prod equip & ret 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 2-23-90

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

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

FEB 27 1990