

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

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. CIL WELL <input checked="" type="checkbox"/> CAB WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name NORTHEAST DRINKARD UNIT
2. Name of Operator SHELL WESTERN E&P INC. (4431 WCK)	8. Farm or Lease Name NORTHEAST DRINKARD UNIT
3. Address of Operator P. O. BOX 576, HOUSTON, TX 77001	9. Well No. 303
4. Location of Well UNIT LETTER S 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 3 TOWNSHIP 21-S RANGE 37-E NMPM.	16. Field and Pool, or Wildcat NORTH EUNICE BLINEBRY- TUBB-DRINKARD OIL & GAS
15. Elevation (Show whether DF, RT, GR, etc.) 3435' 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 type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	COMMENCE DRILLING OPER. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> OAP, AT / CTI	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) POOH w/ prod equip.
- 2) Perf Blinebry 5725'-5753' and Tubb 6046'-6038' w/ 1 JSPF.
- 3) Selectively AT Blinebry 5725'-5753 and Tubb 6046'-6038' w/ 2100 gals 15% NEFE HCl acid, using BP's and pkrs.
- 4) Install injection equip, setting Guiberson Uni-VI pkr @ 5670'.
- 5) Press test to 300 psi for 30 min.
- 6) Place well on injection.

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

SIGNED A. J. FORE TITLE SUPERVISOR REG. & PERMITTING DATE OCT 21 1988

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE OCT 24 1988

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

OCT 24 1988

OCD
HOBBS OFFICE

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SUNDRY NOTICES AND REPORTS ON WELLS

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USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. CIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator SHELL WESTERN E&P INC.	8. Farm or Lease Name LIVINGSTON*
3. Address of Operator P. O. BOX 576, HOUSTON, TX 77001 (WCK 4435)	9. Well No. 1*
4. Location of Well UNIT LETTER <u>S</u> <u>1980</u> FEET FROM THE <u>SOUTH</u> LINE AND <u>1980</u> FEET FROM THE <u>WEST</u> LINE, SECTION <u>3</u> TOWNSHIP <u>21S</u> RANGE <u>37E</u> N.M.P.M.	10. Field and Pool, or Wildcat DRINKARD
15. Elevation (Show whether DF, RT, GR, etc.) 3435' DF	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"/>	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"/>	OTHER <u>OAP & ACDZ</u> <input checked="" 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.

*NEW WELL NAME: NORTHEAST DRINKARD UNIT #303

1. POH w/prod equip.
2. Tag PBTD & CO if necessary.
3. Spot 15% HCl across existing Drinkard perms 6528' - 6640'.
4. Perf Blinbry 5800' - 6026' (1 JSPF).
5. Set RBP @ 6040'.
6. Acdz perms 5800' - 6026' w/4000 gals 15% HCl + 750# rock salt.
7. POH w/RBP.
8. Install prod equip & return well to prod.

NOTE: Well will be on prod until inj facilities are ready for inj.

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

SIGNED A. J. FORE TITLE SUPERVISOR REG. & PERMITTING DATE 12-28-87
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
DEC 30 1987
OCC
HOBBS OFFICE