

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

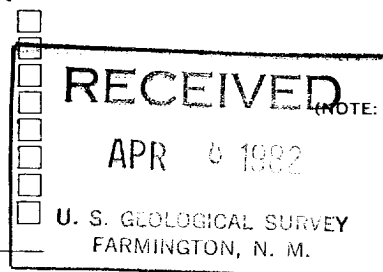
SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☐ well gas ☒ well other ☐
2. NAME OF OPERATOR  
*Shell Oil Company*
3. ADDRESS OF OPERATOR *ATTN: P.G. Gelling*  
*P.O. Box 831 Houston, Tx 77001 Rm. #6459 WCK*
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: *1520' FNL & 1000' FEL SEC. 24*  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:  
TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☒  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) ☐

SUBSEQUENT REPORT OF:



5. LEASE  
*NM - 12942*
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME  
*WEST MESA UNIT*
8. FARM OR LEASE NAME  
*WILDCAT*
9. WELL NO.  
*FEDERAL 1-24A*
10. FIELD OR WILDCAT NAME  
*WILDCAT*
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
*SE 1/4 NE 1/4 T11N R1E*
12. COUNTY OR PARISH *BERNALILLO* 13. STATE *NEW MEXICO*
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
*5795' KB*

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

REQUEST APPROVAL TO COMPLETION TEST THE MANOS SHALE  
BETWEEN 18,600' - 18,746' IN SUBJECT WELL. COMPLETION PROGRAM  
PROPOSES TO PERFORATE, ACIDIZE, AND POSSIBLY FRAC.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED *W. E. N. KELLDORF* TITLE *DIV. PROD. ENG.* DATE *4-5-82*  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

CONFIDENTIAL

\*See Instructions on Reverse Side

APPROVED

APR 14 1982

*Elliott*  
FOR DISTRICT ENGINEER

NMOCC - Santa Fe