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NEW MEXICO OIL CONSERVATION COMMISSION

Form O-103
Supersedes 736
1-102 and 1-103
Effective 1-1-65

JAN 3 7 55 AM '67

SUNDY 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 - "A" (FORM O-101) FOR SUCH PROPOSALS.)		5a. Indicate Type of Lease State ☒ Fee ☐
1. OIL WELL ☐ GAS WELL ☒ OTHER ☐		5. State Oil & Gas Lease No. K-867
2. Name of Operator Shell Oil Company (Western Division)		7. Unit Agreement Name
3. Address of Operator P. O. Box 1509, Midland, Texas 79701		8. Farm or Lease Name State MQD
4. Location of Well UNIT LETTER L 1650' FEET FROM THE south LINE AND 990 FEET FROM THE west LINE, SECTION 17 TOWNSHIP 16S RANGE 32E NMPM.		9. Well No. 4
15. Elevation (Show whether DF, RT, CR, etc.) 4355' DF		10. Field and Pool, or Wildcat Mesa-Queen (Gas)
		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 ☐	REMEDIAL WORK ☒
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☐
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☐
OTHER ☐	OTHER ☐

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 1708.

October 31, 1966 thru 12-29-66.

1. Pulled tubing.
2. Treated perforations 3387' - 3397' w/6000 gallons gelled water + 20# Gaur Gum + 20# adomite aqua + 1 gallon Adomall + 1000# 20-40 Mesh Sand + 4000# 10-20 Mesh Sand. Flushed w/54 bbls. gelled water containing 20#/1000 gallon Gaur Gum.
3. Ran 107 jts. (3357') 2 3/8", J-55 tbg., hung at 3367'; BPMA 3367' - 3361'; tubing perforations 3361' - 3358'; Mechanical pump shoe 3327' - 3326'.
4. Flowed 100 MCFPD.

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

SIGNED N. W. Harrison N. W. Harrison TITLE Senior Exploitation Engineer DATE December 30, 1966

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: