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NEW MEXICO OIL CONSERVATION COMMISSION

AUG 11 10 50 AM '69

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
K-3836

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Charles B. Read	8. Farm or Lease Name Shell-State
3. Address of Operator P. O. Box 2126 Roswell, New Mexico 88201	9. Well No. 4
4. Location of Well UNIT LETTER F, 1980 FEET FROM THE North LINE AND 2094.5 FEET FROM THE West LINE, SECTION 18 TOWNSHIP 11S RANGE 33E NMPM.	10. Field and Pool, or Wildcat North Bagley Lower Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4313.3 GL	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

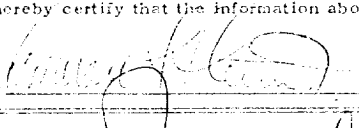
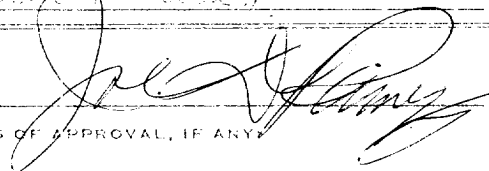
REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

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.

8-7-69: Spudded @ 2:30 P.M.

Ran 14 jts 381' of 12 3/4", 48#, FWPS csg, set @ 380' RKB.
Cmt w/350 sx type H cmt w/2% CaCl. Plug down @ 8:30 P.M.
Cmt circ. WOC 18 hrs. Press test to 1500# for 30 min.
Test OK.

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

SIGNED 	TITLE Agent	DATE 8-8-69
APPROVED BY 	TITLE DISTRICT	DATE AUG 11 1969
CONDITIONS OF APPROVAL, IF ANY:		