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NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Shell Oil Company	8. Farm or Lease Name Matthews
3. Address of Operator P. O. Box 1509, Midland, Texas 79701	9. Well No. 1
4. Location of Well UNIT LETTER H , 1980 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 19 TOWNSHIP 8-S RANGE 37-E NMPM.	10. Field and Pool, or Wildcat Allison Penn.
15. Elevation (Show whether DF, RT, GR, etc.) 4050'	12. County Roosevelt

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 checked="" 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 type="checkbox"/>	PLUG AND ABANDONMENT <input 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.

- Spot 25 sx plug across perfs, bring cement 100' above perfs.
- Pull and lay down tubing.
- Cut off casing at 7000' and spot 50 sx plug.
- Pull casing to 5450' and spot 50 sx plug.
- Pull casing to 4150' and spot 50 sx plug.
- Pull casing and spot 10 sx plug at surface.
- Cut off wellhead and erect marker.

Verbal approval granted by Joe D. Ramey NMOCC, 11-4-68.

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

SIGNED Original Signed By N.W. Harrison N.W. Harrison TITLE Staff Operations Engr. DATE 2-25-69

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: