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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 checked="" type="checkbox"/> Fee <input type="checkbox"/>	
5. State Oil & Gas Lease No. <b>E-2115</b>	
7. Unit Agreement Name <b>-</b>	
8. Farm or Lease Name <b>State "SC"</b>	
9. Well No. <b>1</b>	
10. Field and Pool, or Wildcat <b>Saunders</b>	
12. County <b>Lea</b>	

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <small>(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.)</small>	
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	
2. Name of Operator <b>Shell Oil Company</b>	
3. Address of Operator <b>P. O. Box 1858 Roswell, New Mexico</b>	
4. Location of Well UNIT LETTER <b>C</b> , <b>660</b> FEET FROM THE <b>north</b> LINE AND <b>1980</b> FEET FROM THE <b>West</b> LINE, SECTION <b>33</b> TOWNSHIP <b>14 S</b> RANGE <b>33-E</b> NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.) <b>4221' df</b>	

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 checked="" 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 <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.

**Operation: April 6 thru 13, 1965**

1. Acid treated with 2000 gallons 15% NEA containing Fe additive down casing.
2. Recovered load.
3. In 24 hours pumped 8 BO plus 32 BW.

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

Original Signed By

**C. R. Coffey**

**C. R. Coffey**

Acting District

**Exploitation Engineer**

DATE **April 14, 1965**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: