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

NEW MEXICO OIL CONSERVATION COMMISSION

WARRANTS OFFICE O. G. C.
MAY 31 7 50 AM '67

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
OG-5373

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-	7. Unit Agreement Name -
2. Name of Operator Shell Oil Company (Western Division)	8. Farm or Lease Name State HTB
3. Address of Operator P.O. Box 1509, Midland, Texas 79701	9. Well No. 1
4. Location of Well UNIT LETTER D , 700 FEET FROM THE North LINE AND 580 FEET FROM THE West LINE, SECTION 25 TOWNSHIP 12-S RANGE 31 NMPM.	10. Field and Pool, or Wildcat East Hightower-Upper Penn.
15. Elevation (Show whether DF, RT, GR, etc.) 4228' DF	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 <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input 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.

1. Pull rods and pump.
2. Install high pressure valve in tubing.
3. Treat perforations 9833' - 9841' via tubing-casing annulus w/3000 gallons 28% NEA overflushed w/3000 gallons treated fresh water.
4. Run rods and pump.
5. Place well on production.

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

Original Signed By

SIGNED **J. D. DUREN** **N. W. Harrison** TITLE **Staff Exploitation Engineer** DATE **May 29, 1967**

APPROVED BY *[Signature]* TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

9
18 JAN 27 1967