| NO. OF COPIES RECEIVED | | Form C-103 Supersedes Old |
|---|---|---|
| DISTRIBUTION | | C-102 and C-103 |
| SANTA FE | NEW MEXICO OIL CONSERVATION COMMISS | ION Effective 1-1-65 |
| FILE | | |
| U.S.G.S. | | 5a. Indicate Type of Lease |
| LAND OFFICE | | State K Fee |
| OPERATOR | | 5. State Oil & Gas Lease No. B-9264 |
| | | D= 7204 |
| LOO NOT USE THIS FORM FOR PROPO USE "APPLICATION | ervoir. | |
| 1. | | 7. Unit Agreement Name |
| OIL GAS WELL | OTHER- | |
| 2. Name of Operator | 8. Farm or Lease Name | |
| Shell 011 Company | State F | |
| 3. Address of Operator | 9. Well No. | |
| P. O. Box 1858, Ros | 2 | |
| 4. Location of Well | | 10. Field and Pool, or Wildcat |
| UNIT LETTER G 16 | FEET FROM HODDS | |
| UNIT LETTER | | |
| THE ABT LINE SECTION | 23 TOWNSHIP 18-S RANGE 37-E | мрм. АШШИНИИНИИНИИ |
| | | |
| | 12. County | |
| | Lea | |
| ^{16.} Check At | propriate Box To Indicate Nature of Notice, 1 | Report or Other Data |
| NOTICE OF INT | | SUBSEQUENT REPORT OF: |
| | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON REMEDIAL WORK | ALTERING CASING |
| TEMPORARILY ABANDON | COMMENCE DRILLING O | PNS. |
| PULL OR ALTER CASING | CHANGE PLANS CASING TEST AND CEMI | |
| | 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 1103.

Operation: March 8 thru March 25, 1965

- 1. Pulled, rods, pump and tubing.
- Ran one 150 grn/ft. followed by one 150 grn/ft. string shot over perforated interval 4106'-4158'.
- 3. Acid treated with 1500 gallons 15% NEA.
- 4. In 24 hours, pumped 22 BO + 118 BW on 14-54" SPM.

| 18. I hereby certify that the inform | nation above is true and comp | lete to the b | best of my knowledge and belief. | | | |
|--------------------------------------|-------------------------------|---------------|--|------|---------|----|
| SIGNED C. R. Coffer | C. R. Coffey | . TITLE _ | Acting District Exploitation Engineer | DATE | 3-29-65 | 11 |
| APPROVED BY | | TITLE_ | · - | DATE | | |
| CONDITIONS OF APPROVAL, IF | ANY: | | | | | |