	-	** .		
NO. OF COPIES RECEIVED	7		Form C-103	
DISTRIBUTION				
SANTA FE				
FILE		C-102 and C-103 Effective 1-1-65		
U.S.G.S.				
	- 273		5a. Indicate Type of Lease	
OPERATOR			State XX Fee.	
	_]		5. State Oil & Gas Lease No.	
		·		
(DO NOT USE THIS FORM FOR P	RY NOTICES AND REPORTS OL ROPOSALS TO DRILL OR TO DEEPEN OR PLUG ATION FOR PERMIT (FORM C-101) FOR SU	N WELLS		
	TION FOR PERMIT -** (FORM C-101) FOR SU	JCH PROPOSALS.)	<u> </u>	
OIL GAS WELL			7. Unit Agreement Name	
2. Name of Operator	OTHER-			
Shell 011 Company	8. Farm or Lease Name			
3. Address of Operator	State V			
- · · · ·	9. Well No.			
P. O. Box 1509, M: 4. Location of Well	2			
	(())		10, Field and Pool, or Wildcat	
UNIT LETTER P	Vacuum			
Last Line, sect	27 100 TOWNSHIP	7-S 35-Е		
		RANGE NM	<sup>19M:</sup> AIIIIIIIII	
	15. Elevation (Show whether	r DF, RT, GR, etc.)	12. County	
	3933 DF		Lea	
16. Check	Appropriate Box To Indiante I			
	Appropriate Box To Indicate 1 NTENTION TO:	Nature of Notice, Report or	Other Data	
		SUBSEQUE	ENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON			
TEMPORARILY ABANDON	FLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
PULL OR ALTER CASING		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT	
	CHANGE PLANS	CASING TEST AND CEMENT JOB		
OTHER		OTHER	[]	
17. Describe Proposed or Completed Or	perations (Clearly state all pertinent det	aila and in the state of the st	ing estimated date of starting any proposed	
work) SEE RULE 1103.	, areas of state are periment aet	uns, una give pertinent dates, includ	ing estimated date of starting any proposed	

- March 27 tnru April 6, 1969
- 1. Acidized via  $2^{11} 5 \frac{1}{2^{11}}$  annulus w/2000 gals 15% NEA.
- 2. Pumped 100 bbls of treated formation water, 1000 gals 15% NEA, 55 bbls fresh water w/l gal Tretolite OS-2520/bb1. Flushed w/100 bb1s treated water at 7 BPM at 1300 psi, followed w/12 bbls gelled brine w/1000# graded rock salt, 1000 gal 15% NEA, 55 bbls w/l gal Tretolite OS-2520/bbl, overflush w/100 bbls treated formation water.
- 3. Placed well on production.

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

SIGNED N. Harr	rison N.W.	Harrison TITLE	Staff	Operations Engr.	DATE	4-8-69
APPROVED BY	DVAL, 4F ANY:	TITLE			APR DATE	141909