

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator SHELL OIL COMPANY	8. Farm or Lease Name STATE "A"
3. Address of Operator P. O. BOX 991, HOUSTON, TEXAS 77001	9. Well No. 5
4. Location of Well UNIT LETTER A, 990 FEET FROM THE NORTH LINE AND 660 FEET FROM THE EAST LINE, SECTION 31, TOWNSHIP 17-S, RANGE 35-E, NMPM.	10. Field and Pool, or Wildcat VACUUM
15. Elevation (Show whether DF, RT, GR, etc.) 3981' DF	12. County LEA

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 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 SQUEEZE OFF WATER FLOW <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOBS <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.

- Set RBP @+6050'. Spot 15' of sand on top.
- Run CBL/VOL/CCL/GR logs from 6035' to surface. Perforate at TOC w/4 way jet gun.
- Set cement retainer +150' above squeeze holes.
- Pump + 2000 sx cmt., Light cmt. w/8#/sx salt, followed by +300 sx cmt, Class "C" w/2% CaCl, circ to surface. Reverse out excess. WOC 24 hours.
- Drill out cmt retainer and cement. Pressure test to 500 psi. Reverse off sand.
- Retrieve BP.
- Proceed to OAP and AT.

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

Signed _____ A. J. FORE	TITLE SUPERVISOR REG. & PERMITTING	DATE MARCH 9, 1982
ORIGINAL SIGNED BY JERRY SEXTON		
APPROVED BY _____	TITLE _____	DATE MAR 15 1982
CONDITIONS OF APPROVAL, IF ANY:		

RECEIVED

MAR 11 1982

G. J. B.
HOBBS OFFICE