

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-33052
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	B-1713
7. Lease Name or Unit Agreement Name	WARN STATE A/C #1
8. Well No.	1
9. Pool name or Wildcat	WILDCAT - (SILURIAN-DEVONIAN)

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. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
2. Name of Operator Shell Western E&P, Inc.	
3. Address of Operator P. O. BOX 576 HOUSTON, TEXAS 77001	
4. Well Location Unit Letter <u>K</u> : <u>2036'</u> Feet From The <u>SOUTH</u> Line and <u>2260'</u> Feet From The <u>WEST</u> Line	
Section <u>SECTION 31</u> Township <u>T17S</u> Range <u>R35E</u> NMPM <u>LEA</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3978' GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: RAN 9 5/8" CASING ☒

12. 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.

9/12/95

RAN 59 JTS 9 5/8" 36# LTC CASING & 48 JTS 9 5/8" 36# STC CASING. CASING LANDED @4797', FC @4750'.

9/13/95

CEMENT WITH 700 SX "C" + 4% GEL + 1% CACL2, 200 SX "H" + 10% GYP., FOLLOWED BY 700 SX "C" + CACL2. DISPLACED WITH 70 BBLS OF FRESH WATER.

9/17/95

RU SCHLUMBERGER//RUN GR/CBL/CCL W/ 0 & 1000 PSI. LOGGERS TD 4734'. TOC 3210'.

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

SIGNATURE Yvonne T. Iverson TITLE LAND REPRESENTATIVE DATE 9/9/95

TYPE OR PRINT NAME YVONNE T. IVERSON TELEPHONE NO. (713)544-3226

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE NOV 21 1995

CONDITIONS OF APPROVAL, IF ANY: