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LAND OFFICE	
OPERATOR	

NEW MEXICO PUBLIC OFFICE OF THE  
CONSERVATION COMMISSION

MAY 22 1 39 PM '69

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

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
389	

**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
3. Address of Operator P. O. Box 1509, Midland, Texas 79701	9. Well No.
4. Location of Well UNIT LETTER H, 1080 FEET FROM THE North LINE AND 600 FEET FROM THE East LINE, SECTION 36, TOWNSHIP 30-N, RANGE 5-E, NMPM.	10. Field and Pool, or Wildcat Tunice
15. Elevation (Show whether DF, RT, GR, etc.) 3550' RT	12. County Dona

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <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.

MAY 1 THROUGH MAY 18, 1969

1. Pulled rods, pump and tag.
2. Acidized w/8000 gals HCl in 4 - 2000 gal stages.
3. Pumped down tag. with treated fresh water, and w/1000 both balls.
4. In 24 hours pumped 40 IP and 9 IP - 12-44 OPM.
5. Placed 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 N. W. Harrison TITLE Staff Operations Engineer DATE 5-21-69  
SIGNED N. W. Harrison

APPROVED BY John W. Runyan TITLE DATE  
CONDITION OF APPROVAL, IF ANY: