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# NEW MEXICO OIL CONSERVATION COMMISSION

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.	

## 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 J
3. Address of Operator P. O. Box 1509, Midland, Texas 79701		9. Well No. 5
4. Location of Well UNIT LETTER <u>J</u> <u>1730</u> FEET FROM THE <u>South</u> LINE AND <u>2055</u> FEET FROM THE <u>East</u> LINE, SECTION <u>32</u> TOWNSHIP <u>20S</u> RANGE <u>37E</u> NMPM.		10. Field and Pool, or Wildcat Oil Center Blinebry
15. Elevation (Show whether DF, RT, GR, etc.) 3538 DF		12. County Lea

16.

## Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

OTHER Test Blinebry ☒

### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

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.

1. Push BP to TD. Squeeze Blinebry perforations 5961-6192' with 150+ sx cement.
2. Perforate Blinebry 5926-32', 5962-76' with 1 JSPF.
3. Acidize, test and complete as warranted.

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

SIGNED N. W. Harrison TITLE Staff Production Engineer DATE 11-16-73

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: