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LAND OFFICE	
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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. E-9141
7. Unit Agreement Name -
8. Farm or Lease Name State GRA
9. Well No. 1
10. Field and Pool, or Wildcat Grama Ridge
12. County Lea

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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-
2. Name of Operator Shell Oil Company (Western Division)
3. Address of Operator P. O. Box 1509, Midland, Texas 79701
4. Location of Well UNIT LETTER E , 1980 FEET FROM THE north LINE AND 660 FEET FROM THE west LINE, SECTION 3 TOWNSHIP 22-S RANGE 34-E NMPM.
15. Elevation (Show whether DF, RT, CR, etc.) 3630' GR

16. 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.

1. Perforated thru tubing w/1 Welex ceramic JS/ft. @ 12,984', 12,985', 13,010', 13,012', 13,015', 13,018', 13,021' (7 holes).
2. Placed on production.
3. In 24 hrs. flowed 107 BC w/gas @ rate of 4.7 MCFPD.

8. 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 Exploitation Engineer DATE March 12, 1968

PROVED BY [Signature]
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____