

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 88240

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. 30-025-32671
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-2512

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.)		7. Lease Name or Unit Agreement Name Shell State	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		8. Well No. #2	
2. Name of Operator Strata Production Company		9. Pool name or Wildcat south Delaware Red Tank Bone Spring	
3. Address of Operator P.O. Box 1030, Roswell, New Mexico 88202-1030			
4. Well Location Unit Letter <u>D</u> : <u>660</u> Feet From The <u>North</u> Line and <u>560</u> Feet From The <u>West</u> Line Section <u>36</u> Township <u>22 South</u> Range <u>32 East</u> NMFM Lea County			
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3756' GR			

11. 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"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <u>Completion</u> <input checked="" type="checkbox"/>	

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.

05/24/95: MIRU completion unit. Clean out to 5020'. Circulate hole clean with 2% KCL.

05/25/95: Perforate (64) .42 holes at 4939'-4955'.

05/26/95: Acidize with 1500 gallons 7 1/2% NEFE. Flow down. Swab test.

05/31/95: Frac 1700# 20/40 Jordan sand. Swab test.

06/01/95: Kick well off. Release packer. TOH with tools. TIH with tubing open-ended to 4945'.

06/07/95: Flowing. Well placed on production.

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

SIGNATURE Carol J. Garcia TITLE Production Records Manager DATE 8/4/95

TYPE OR PRINT NAME Carol J. Garcia

TELEPHONE NO. 505-622-112

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE AUG 14 1995

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

AUG 17 1909

U.S. DEPT. OF AGRICULTURE
BUREAU OF PLANT INDUSTRY