TOPIES RECEIVED	, en		Form C-103
TRUTION			Supersedes Old
	NEW MEXICO OIL CONSERVATION COMMISSION		C-102 and C-103 Effective 1-1-65
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Zivivivion Commodicin	Effective I-1-03
			Sa. Indicate Type of Lease
FFICE			State X Fee
OR			5. State Oil & Gas Lease No.
מואווי	V NOTICES AND DEPORTS ON	WELLS	
SUNDRY NOTICES AND REPORTS ON WELLS ON NOT USE THIS FORM FOR PROPOSALS TO DRILL ON TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			
	, , , , , , , , , , , , , , , , , , , ,	1 1 1 1 1 1 1 1	7. Unit Agreement Name
AS WELL WELL	OTHER-		
Injury of Operator			8. Farm or Lease Name
Shell Oil Company			State M
3, 1. ress of Operator			9. Well No.
P. O. Box 1509, Midland, Texas 79701			5
4. Location of Well			10. Field and Pool, or Wildcat
0 3300 South 1980			Fumont
			······································
Lot 15	on 1 Township 21S	35E	
THE LINE, SECTION	ON TOWNSHIP	RANGE NMP	~ <i>(111111111111111111111111111111111111</i>
	15. Elevation (Show whether	DF, RT, GR, etc.)	12, County
	3567		Lea
$\frac{16}{1}$			
	Appropriate Box To Indicate N	<u>. </u>	
NOTICE OF IN	ITENTION TO:	SUBSEQUE	NT REPORT OF:
		L X 1	
PERFORM PEMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENSE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
	. [7]	OTHER	
OTHER			
17. Describe Proposed or Completed Or	perations (Clearly state all pertinent det	ails, and give pertinent dates, including	ng estimated date of starting any proposed
work) SEE RULE 1103.			
	4-17-75 to	4-19-75	
	4 1, 75 20	7 25 75	
1 Dulled made numb or	od tubing		
1. Pulled rods, pump ar	asing w/1 JSPF @ 3725, 3	738 3741 3744 3759	3761, 3763, 3765, 3767,
2. Perforated 5 1/2" ca	787, 3794, 3797, 3806, 3	809 3813 3823 3827	& 3831'.
	v/3000 gal 20% NEA in 10	etages	
3. Acidized 3725-3831 v	ig, hung @ 3733'. Ran 2	" v 1 1/2" v 16' nump c	n 146 - 3/4" rods.
		X 1 1/2 X 10 Pomp 0	2,1 2,5
Placed on production	1.		
Charles against at an the later and the	above is true and complete to the bast	of the broads of	
: . I hereby certify that the information	rapove is true and complete to the bist	Strain Barren Control	
71.11		N. W. Harrison	
MASTON		N. W. Hallison	6_4_75
12 (12)	TITLE ST	aff Production Engineer	6-4-75
10000		aff Production Enginee	

ONDITIONS OF APPROVAL, IF ANY:

RELIED ED

JUN 17 1975 (AL COURT TO ME AL COMM.