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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. B-1167 |

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> | 7. Unit Agreement Name --- |
| 2. Name of Operator Shell Oil Company (Western Division) | 8. Farm or Lease Name State "1" |
| 3. Address of Operator Post Office Box 1509, Midland, Texas 79701 | 9. Well No. 2 |
| 4. Location of Well UNIT LETTER A 660 FEET FROM THE North LINE AND 1260 FEET FROM East 13 21-S 35-E THE _____ LINE, SECTION _____ TOWNSHIP _____ RANGE _____ NMPM. | 10. Field and Pool, or Wildcat Eumont |
| 15. Elevation (Show whether DF, RT, GR, etc.) 3622' DF | 12. County Lea |

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 checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | OTHER <input type="checkbox"/> |

SUBSEQUENT REPORT OF:

| | |
|--|---|
| REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| CASING TEST AND CEMENT JOBS <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. Pull 2" tubing.
2. Install 2" valve.
3. Temporarily abandon.

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

ORIGINAL SIGNED

SIGNED **BY D. L. LILLY** **D.L. Lilly** TITLE **Division Mechanical Engineer** DATE **September 19, 1967**

APPROVED BY  TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: