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|                                                                                                      |
|------------------------------------------------------------------------------------------------------|
| 5a. Indicate Type of Lease<br>State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.<br>B-11613                                                              |

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 checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-                                                                                        | 7. Unit Agreement Name<br>NORTHEAST DRINKARD UNIT                                   |
| 2. Name of Operator<br>SHELL WESTERN E&P INC.                                                                                                                                                            | 8. Farm or Lease Name<br>NORTHEAST DRINKARD UNIT                                    |
| 3. Address of Operator<br>P. O. BOX 576, HOUSTON, TX 77001 (WCK 4435)                                                                                                                                    | 9. Well No.<br>115                                                                  |
| 4. Location of Well<br>UNIT LETTER <u>E</u> <u>5940</u> FEET FROM THE <u>SOUTH</u> LINE AND <u>660</u> FEET FROM<br>THE <u>WEST</u> LINE, SECTION <u>2</u> TOWNSHIP <u>21S</u> RANGE <u>37E</u> N.M.P.M. | 10. Field and Pool, or Widened<br>NORTH EUNICE BLINEBRY-<br>TUBB-DRINKARD OIL & GAS |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>3495' GR                                                                                                                                                | 12. County<br>LEA                                                                   |

16. 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 OPER. <input type="checkbox"/>    | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input checked="" type="checkbox"/> Pres tst CIBP above Abo, log, OAP, andz & CTI (Order No. R-8541) | 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 1703.

1. POH w/prod equip.
2. CO to PBTD @ 6886'.
3. Pres tst CIBP @ 6902' to 500#. If pres holds, cap w/35' cmt. If pres does not hold, set new CIBP @ 6885' & cap w/35' cmt.
4. Run BR/CNL/CCL from PBTD to 5700'.
5. Perf Blinebry/Tubb/Drinkard @ depths determined from log eval.
6. Acdz Blinebry/Tubb/Drinkard w/treatment sch based on log eval.
7. Install inj equip, setting Guib Uni-Pkr VI @ ±5800'.
8. Pres tst csg to 500# for 30 min.
9. Commence inj.

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

SIGNED A. J. FORE TITLE SUPERVISOR REG. & PERMITTING DATE 10-4-88

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT SUPERVISOR DATE 10-4-88  
CONDITIONS OF APPROVAL, IF ANY: