

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. | 30-025-06400 |
| 5. Indicate Type of Lease | STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No. | |
| 7. Lease Name or Unit Agreement Name | NORTHEAST DRINKARD UNIT |
| 8. Well No. | 102 |
| 9. Pool name or Wildcat | NORTH EUNICE BLINEBRY-TUBB-DRINKARD OIL & GAS |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) | 3486' KB |

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. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 2. Name of Operator SHELL WESTERN E&P INC. |
| 3. Address of Operator P. O. BOX 576, HOUSTON, TX 77001 (WCK 4435) | 4. Well Location Unit Letter H : 1582 Feet From The NORTH Line and 990 Feet From The EAST Line Section 4 Township 21S Range 37E NMPM LEA County |

| | |
|---|--|
| 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"/> | REMEDIAL WORK <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| OTHER: <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| | CASING TEST AND CEMENT JOB <input type="checkbox"/> |
| | OTHER: Cmt sqzd, OAP & Acd <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.

6-22 to 6-30-89:

POH w/prod equip. CO to 5872'. Set pkr @ 5560'. Sqzd Blinebry perfs 5682' - 5862' w/100 SX Cls "C" cmt + .3% CF-1 followed by 100 SX Cls "C" cmt + 2% CaCl₂. Rel pkr & POH. DO cmt 5520' - 5750'. Pres tstd sqz to 500#, held OK. Cont drlg cmt to 5862'. Drld soft cmt & fill to 5935'. Perf'd Blinebry 5723' - 5931' (1 JSPF). Acd perfs 5723' - 5931' w/3360 gals 15% HCl. Installed prod equip & ret'd to prod.

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

SIGNATURE J. H. SMITHERMAN TITLE REGULATORY SUPV. DATE 8-4-89
TYPE OR PRINT NAME J. H. SMITHERMAN (713) 870-3797 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

AUG 8 1989