Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office	.			
DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980	Santa Fe, New Mexico 87504-2088		WELL API NO. 30-025-06486	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease	EE 🗆
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.	
	ICES AND REPORTS ON WELL	\$		
(DO NOT USE THIS FORM FOR PRODIFFERENT RESEL	DPOSALS TO DRILL OR TO DEEPEN O RVOIR. USE "APPLICATION FOR PERM -101) FOR SUCH PROPOSALS.)	R PLUG BACK TO A	7. Lease Name or Unit Agreement Name	
1. Type of Well: OIL GAS WELL X WELL	OTHER		Northeast Drinkard Unit	
2. Name of Operator			8. Well No.	ļ
Shell Western E&P, Inc	c		219	
3. Address of Operator		E020 1101/	9. Pool name or Wildcat N. Eunice Blinebry-Tubb-Dri	nkard
P.O. Box 576, Houston	<u>n, TX 77001 S.A. Galik</u>	- 5239 WCK	N. EUNICE BITTEDI Y-TUDB-DI I	TIKGI U
4. Well Location Unit Letter N: 355	Feet From The South	Line and 2	300 Feet From The West	Line
Section 2	Township 21S Ra	nge <u>37E</u>	имрм Lea	County
	10. Elevation (Show whether	er DF, RKB, RT, GR, e 3499 DF	etc.)	
11. Check A	ppropriate Box to Indicate		e, Report, or Other Data	
_	NTENTION TO:	SU	BSEQUENT REPORT OF	:
10110201				Г
PERFORM REMEDIAL WORK	PLUG AND ABANDON L	REMEDIAL WORK	☐ ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	NG OPNS. U PLUG AND ABANDON	IMENT L
PULL OR ALTER CASING		CASING TEST AND C	CEMENT JOB	_
OTHER:		OTHER:	OAP, AT	[X
work) SEE RULE 1103. 3-15 To 3-18-95	Set Pkr @ 5890°. Had comm	n w/orev sazd Blic	nebry perfs 5848-5878. Reset Fervals, 5784-5876 (1 JSPF). AT	
5784-5939 w/3400 a	al 20% HCL. Set RBP @ 5832'BP and PKR. Install product	and PKR @ 5/65	. AI 5/84-5800 W/2330 yai Ui	
I hereby certify that the information above	is true and complete to the best of my knowled		5-3-	-95
SIGNATURE SAWELLY	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	пив <u>Reg. & Perr</u>	mit. Mgr. DATE TELEPHONE NO. 713/	
TYPE OR PRINT NAME G. S.	Nady			
(This space for State Use) ORIG	NAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR			1 1 19
	T	TILE	DATE	