

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-76

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.

SUNDY 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. CIL WELL ☒ CAB WELL ☐ OTHER-	7. Unit Agreement Name NORTHEAST DRINKARD UNIT
2. Name of Operator SHELL WESTERN E&P INC. (4431 WCK)	8. Farm or Lease Name NORTHEAST DRINKARD UNIT
3. Address of Operator P. O. BOX 576, HOUSTON, TX 77001	9. Well No. 219
4. Location of Well UNIT LETTER <u>N</u> <u>3550</u> FEET FROM THE <u>South</u> LINE AND <u>2300</u> FEET FROM <u>West</u> LINE, SECTION <u>2</u> TOWNSHIP <u>21-S</u> RANGE <u>37-E</u> N.M.P.M.	10. Field and Pool or Widened NORTH EUNICE BLINEBRY- TUBB-DRINKARD OIL & GAS
11. Elevation (Show whether DF, RT, GR, etc.) 3498' DF	12. County LEA

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data.

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	OTHER ☒ SQZ, OAP, AT, LOG

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.

1-2-88 to 1-12-88:

POOH w/ prod equip. AT Blinebry 5677' - 5878' w/ 250 gals 15 % NEFE HCl. Sqz Blinebry 5677' - 5878' w/ 100 sxs class "C" cmt + .3% Halad-9 followed by 50 sxs class "C" cmt + 2% CaCl₂. DO to 5950'. Perf Blinebry 5894' - 5939' w/ 1 JSPF. AT Blinebry 5894' - 5939' and 5850' - 5878' (due to communication) w/ 2135 gals DI NEFE acid + 250# rock salt. Run GR/Temp log from PBDT to 5500'. RIH w/ prod equip and return to production.

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

SIGNED W.F.N. Kelldorf WFN KELLDORF TITLE STAFF PRODUCTION ENGINEER DATE 11/2/88
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: