

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-2512
2. Name of Operator Shell Western E & P Inc.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 576 Houston, TX 77001-0576 (WCK 4587) 713/870-3797	7. If Unit or CA, Agreement Designation NORTHEAST DRINKARD UNIT
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FSL & 1980' FEL SEC. 3 T21S-R37E	8. Well Name and No. 305
	9. API Well No. 30-025-06493
	10. Field and Pool, or Exploratory Area N. EUNICE BLINEBRY-TUBB-DRAWN
	11. County or Parish, State LEA, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other RETSTD CSG FOR EXTENSION OF TA STATUS	<input type="checkbox"/> Dispose Water

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

11-03-92:

RETSTD CSG TO 500# FOR 30 MIN, HELD. (CHART ATTACHED)

REQUEST 12-MONTH EXTENSION OF TA STATUS.

APPROVED FOR 12 MONTH PERIOD
ENDING 12/1/93

14. I hereby certify that the foregoing is true and correct

Signed W. F. N. KELLDORF Title TECH. MANAGER - ENVIR. ENG. Date 11/17/92

(This space for Federal or State office use)

Approved by _____ Title _____ Date 12/17/92
Conditions of approval, if any:

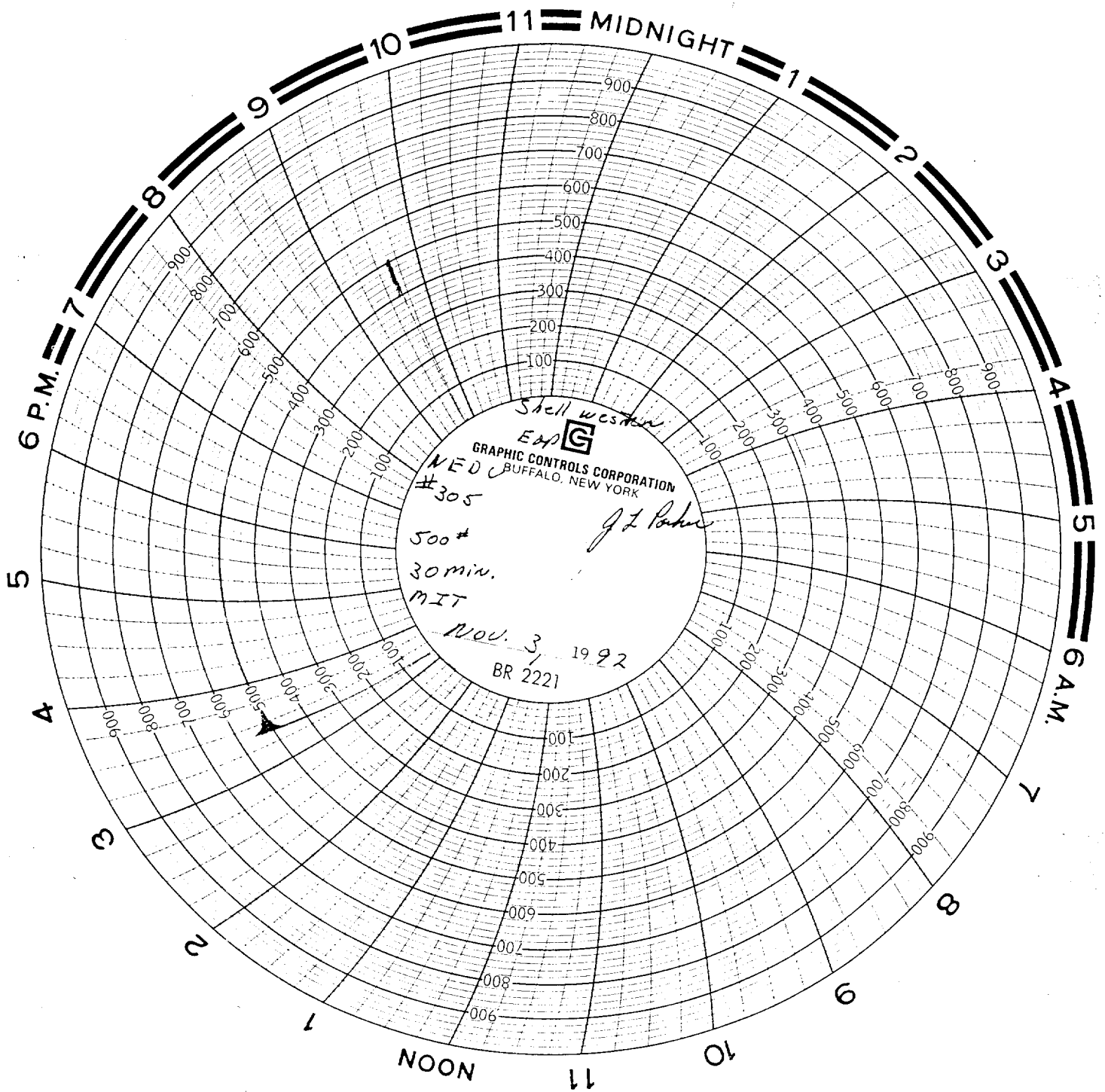
Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

RECEIVED

DEC 21 1992

OLD HONGS OFFICE



REMARKS _____
TIME _____
CASINO P.S. I _____
LEASE _____
GOLD STAR SERVICE CO. INC. _____
DATE _____