

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

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Shell Western E & P Inc.

3. Address and Telephone No.

P.O. Box 576 Houston, TX 77001-0576

713/870-3797

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980' FSL & 1980' FEL SEC. 3
T21S-R37E

5. Lease Designation and Serial No.
NM-2512

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation
NORTHEAST DRINKARD UNIT

8. Well Name and No.
305

9. API Well No.
30-025-06493

10. Field and Pool, or Exploratory Area
N. EUNICE BLINEBRY-TUBB-^{DRINKARD}

11. County or Parish, State

LEA, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other TA

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

1. POH W/PROD EQUIP.
2. CO TO PBD @ +/-6495'.
3. SET CIBP @ +/-6150' & CAP W/35' CMT.
4. SET 2ND CIBP @ +/-5650' AND CAP W/35' CMT.
5. PT CSG TO 500#. CIRC INHIB WTR & TA WELL.

RECEIVED
DEC 6 11 13 AM '90
CARL
AREA
ENGINE
ENR

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

Signed J. H. SMITHERMAN Title REGULATORY SUPV.

Date 12/04/90

(This space for Federal or State office use)

Approved by _____ Title _____ Date 12-10-90
Conditions of approval, if any:
1. NOTIFY BLM AT (505) 393-3612 PRIOR TO PRESSURE TESTING CASING.
2. SUBMIT PRESSURE TEST CHART WITH SUBSEQUENT REPORT.

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
Budget Bureau No. 1004-0135
Expires: September 30, 1990

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

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

SHELL WESTERN E&P INC.

3. Address and Telephone No.

TEL: (713) 870-3797

P. O. BOX 576 (WCK 4435), HOUSTON, TX 77001

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980' FSL & 1980' FEL SEC. 3
T21S-R37E

5. Lease Designation and Serial No.

NM-2512

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

NORTHEAST DRINKARD UNIT

8. Well Name and No.

305

9. API Well No.

30-025-06493

10. Field and Pool, or Exploratory Area

NORTH EUNICE BLT NEBBRY-TUBB-
DRINKARD OIL & GAS

11. County or Parish, State TUBB (PRO GAS)

LEA, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐
- Notice of Intent
-
- ☒
- Subsequent Report
-
- ☐
- Final Abandonment Notice

TYPE OF ACTION

- ☐
- Abandonment
-
- ☒
- Recompletion *
-
- ☒
- Plugging Back
-
- ☐
- Casing Repair
-
- ☐
- Altering Casing
-
- ☐
- Other

- ☐
- Change of Plans
-
- ☐
- New Construction
-
- ☐
- Non-Routine Fracturing
-
- ☐
- Water Shut-Off
-
- ☐
- Conversion to Injection

* Recompl as Gas Well (RE: Order # R-8539)
(Note: Report results of multiple completion on Well Completion or
Recompletion Report and Log form.)

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.)

3-03 to 3-19-90:

POH w/prod equip. CD to 6744'. Set CIBP @ 6530' & capped w/35' cmt. PT csg to 500#, lost 300# in 5 min. Set pkr @ 5880'. PT csg below pkr to 500# for 10 min, held. Rel pkr & reset @ 5812'. PT csg to 500# for 10 min, held. Rel pkr & reset @ 5730'. PT csg to 500# for 10 min, lost 50#. Rel pkr & reset @ 5607'. PT csg to 500#, lost 500# in 5-1/2 min. PT backside to 500# for 10 min, held. Could not estab inj rt. Spot 50 SX Cls "C" cmt from 5785' to 5670'. DO cmt 5532' - 5785'. PT sqz to 500# for 10 min, held OK. CD cmt 6485' - 6510'. Perf'd Tubb 6180' - 6501' (2 JSPE). Acid Tubb perfs 6180' - 6501' w/1875 gals 20% HCl + 30 tons CO₂. Flwd to pit. Swbd well back. Inst pmp/rods/prod equip & ret'd to prod.

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

J. H. SMITHERMAN Title REGULATORY SUPV.

Date 4-27-90

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____

RECEIVED

DEC 12 1980

HOBBY