

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. <b>NM-2512</b>
2. Name of Operator <b>Shell Western E &amp; P Inc.</b>	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. <b>P.O. Box 576 Houston, TX 77001-0576 (WELL 4587) 713/870-3797</b>	7. If Unit or CA, Agreement Designation <b>NORTHEAST DRINKARD UNIT</b>
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>1980' FSL &amp; 660' FEL SEC. 3, T21S, R37E</b>	8. Well Name and No. <b>308</b>
	9. API Well No. <b>30-025-06494</b>
	10. Field and Pool, or Exploratory Area <b>N. EUNICE BLINEBRY-TUBB-Drill</b>
	11. County or Parish, State <b>LEA, NM</b>

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 <b>RETSTD CSG</b>	<input type="checkbox"/> Dispose Water

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

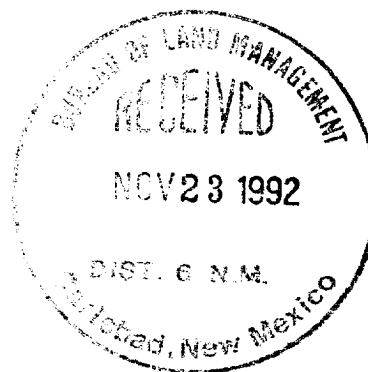
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to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

11-04-92:

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

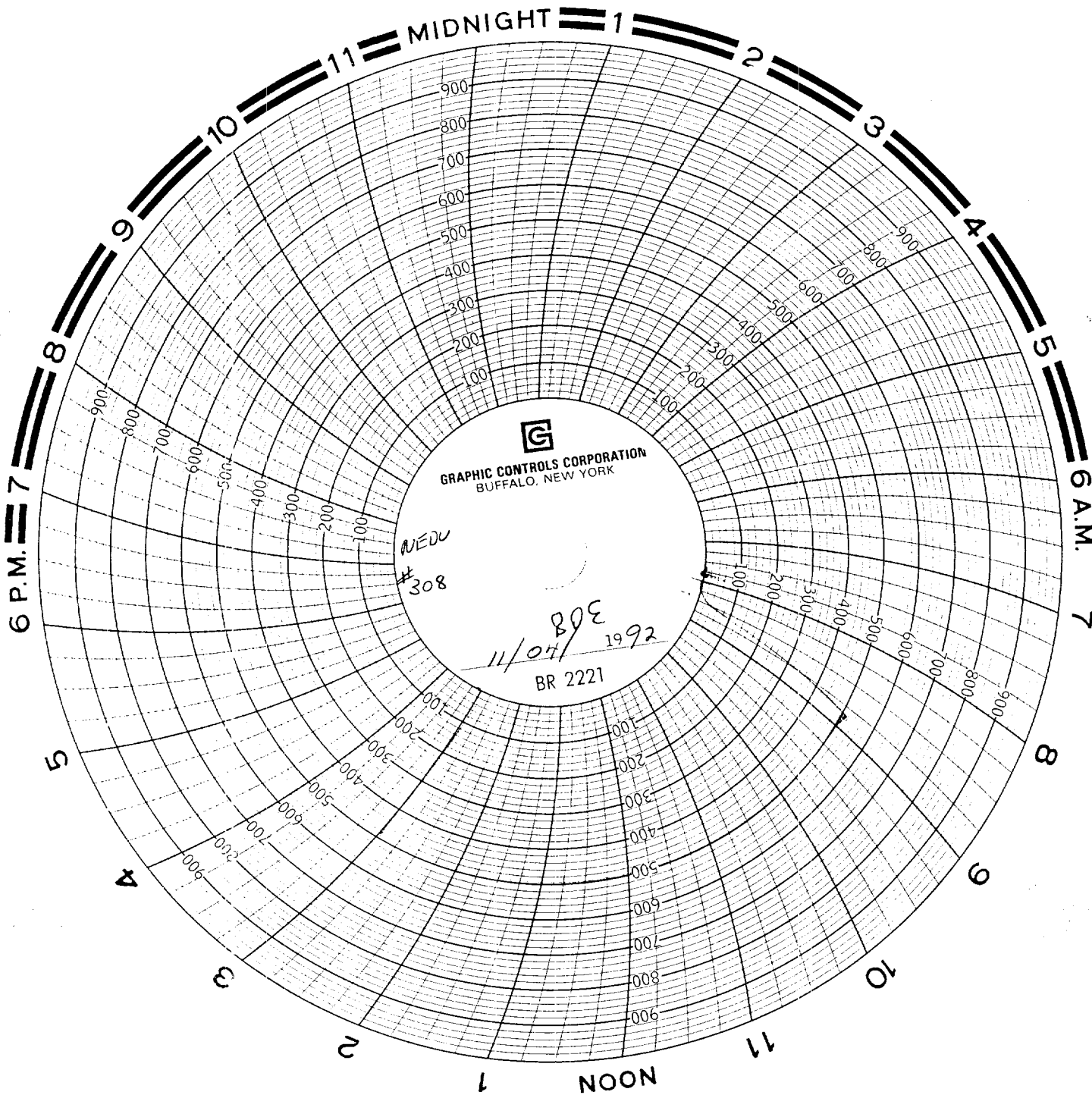
Retd well to TAD status.

APPROVED FOR 12 MONTH PERIOD  
ENDING 12-01-93



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

Signed <u>W. F. N. KELLDORF</u>	Title <u>TECH. MANAGER - ENVIR. ENG.</u>	Date <u>11/17/92</u>
(This space for Federal or State office use)		
Approved by <u>Barbara Glass</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>12-28-92</u>
Conditions of approval, if any:		



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**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 4587), HOUSTON, TX 77001

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

1980' FSL & 660' 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.

NEDU 308

9. API Well No.

30-025-06494

10. Field and Pool or Exploratory Area

N. EUNICE BLINEBRY-TUBB-  
DRINKARD

11. County or Parish, State

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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 **REQUEST FOR EXTENSION  
OF TA'D STATUS**  
☐ 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.)

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PURSUANT TO THE PROVISIONS OF 43 CFR 3162.3-4, SHELL WESTERN SEEKS AUTHORIZATION TO RETAIN THE TA'D STATUS OF THIS WELL FOR AN ADDITIONAL 12 MONTHS. THE NEDU 308 IS BEING HELD AS A POTENTIAL REPLACEMENT INJECTOR FOR THE NEDU 309 (LESS THAN 100' AWAY).

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

Signed W. F. N. KELLDORF Title TECH. MANAGER - ENVIR. ENG. Date 6-17-92

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date 6-23-92  
Conditions of approval, if any: \_\_\_\_\_