

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-06512
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	NORTHEAST DRINKARD UNIT
8. Well No.	303W
9. Pool name or Wildcat	NORTH EUNICE BLINEBRY-TUBB-DRINKARD
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3435' DF

SUNDRY 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. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Water Injector	
2. Name of Operator Shell Western E&P, Inc.	
3. Address of Operator P.O. Box 576, Houston, TX 77001 Shirley Galik - 5239 WCK	
4. Well Location Unit Letter S : 1980 Feet From The South Line and 1980 Feet From The West Line Section 3 Township 21S Range 37E NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3435' DF	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: Plug Back to Blinebry & AT ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

6/22/95 To 6/30/95

POOH w/Inj Eqmt. Set CIBP @ 5990'. Cap w/25' cmt. Set Pkr @ 5770'. Acidize perfs (5800-5954) w/1890 gal 20% HCL and rock salt as divert. Set RBP @ 5775' and Pkr @ 5636'. PT csg to 500 PSI - held o.k. Spot acid across perfs. Pmp 420 gal 20% HCL in perfs (5725-5753). Rel Pkr and retrieve RBP. Set Pkr @ 5624'. Circ w/inhibited fluid. PT csg to 500 PSI for 30 min. (Chart attached) Retrieve Pkr and Return well to injection.

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

SIGNATURE Shirley A. Galik TITLE MGR - Reg. & Permitting DATE 8-1-95  
TYPE OR PRINT NAME for: G. S. Nady TELEPHONE NO. 713/544-4219

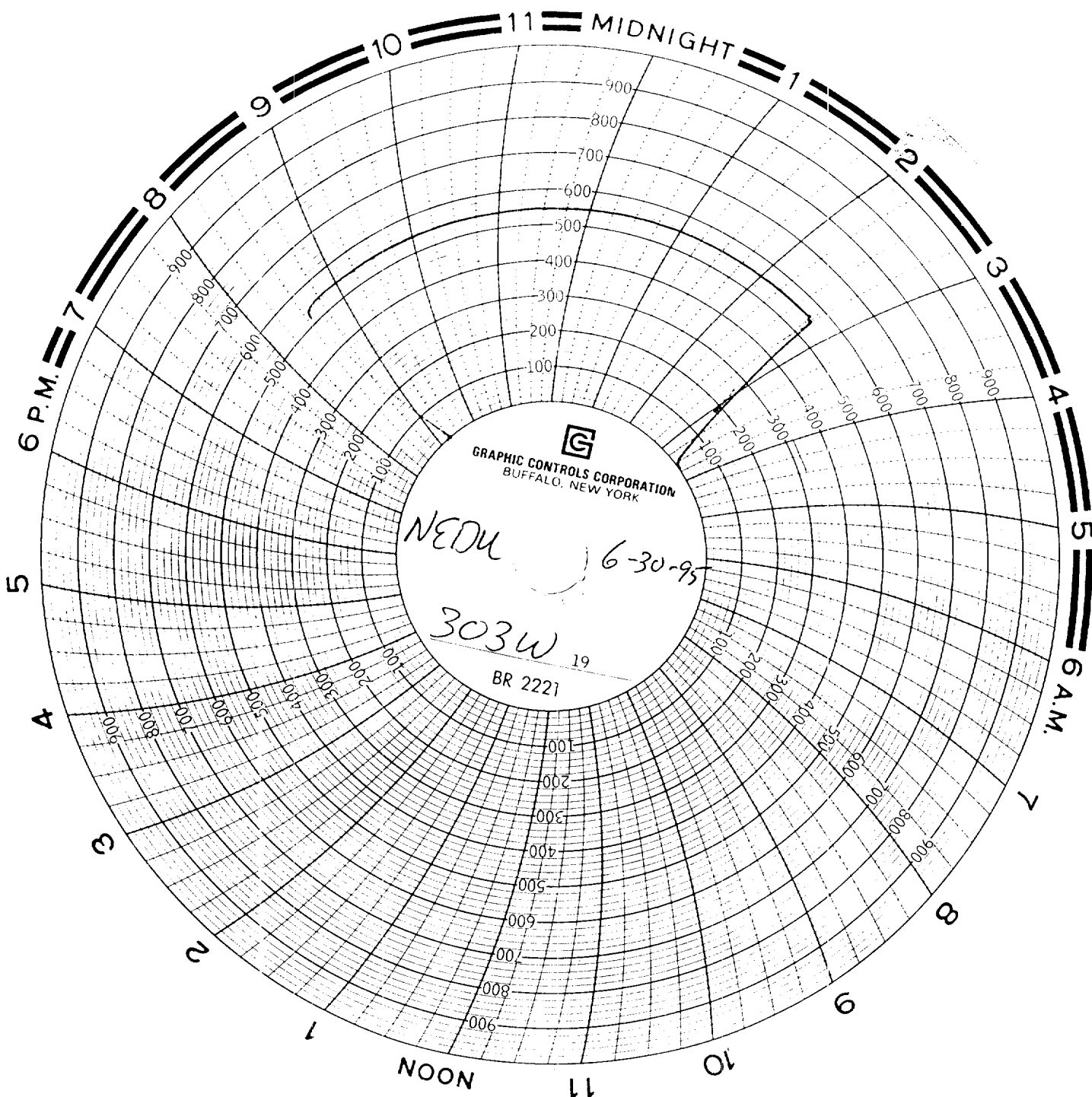
(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE AUG 14 1995  
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 17 1995

COMMUNICATIONS  
OFFICE



SHELL

NEDL 303W

30 MIN CHART

GOLD STAR

UNIT #40

Arnold Sorrells

Arnold Sorrells

Shell Western E&P INC.

NEDU 303W

Robert N. Gilchrist

6-30-95

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

**OIL CONSERVATION DIVISION**

310 Old Santa Fe Trail, Room 206  
Santa Fe, New Mexico 87503

WELL API NO.  
30-025-06512

5. Indicate Type of Lease  
FED ☐ STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

**SUNDRY 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. Type of Well:  
Oil Well ☐ Gas Well ☐ Other ☐ Water Injector

2. Name of Operator  
SHELL WESTERN E&P INC.

3. Address of Operator  
P. O. BOX 1950, HOBBS, NM 88240 505/393-0199

7. Lease Name or Unit Agreement Name

NORTHEAST DRINKARD UNIT

8. Well No. 303

9. Pool name or Wildcat  
N. EUNICE BLINEBRY-TUBB-DRINKARD

4. Well Location  
Unit Letter KS : 1980 Feet From The South Line and 1980 Feet From The West Line  
Section 3 Township 21 South Range 37 East NMPM LEA County

10. Elevation (Show whether DF, RKB, RT GR, etc.)  
3435 (D F)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: Plug Back to Blinebry & Acid Treat ☒

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG & ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Pull out of hole with injection equipment.
2. Run in hole with Bit and Scraper and tag T.D. @ 5700'.
3. Set Cast Iron Bridge Plug at 5990.
4. Acid treat B3&4 perfs (5800>5954) with 1890g 20% HCl.
5. Acid treat B2 perfs (5725>53) with 630g 20% HCl.
6. Pull out & lay down workstring.
7. Rin in hole with injection Packer & set @ 5625.
8. Load backside with inhibited fluid and test casing annulus, recording a pressure chart.
9. Return well to injection.

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

SIGNATURE [Signature] TITLE PRODUCTION FOREMAN DATE 06-15-95

TYPE OR PRINT NAME C. L. MANN IAO TELEPHONE NO. 505/393-0209

(This space for State Use) ORIGINAL SIGNED BY

APPROVED BY GARY WINK TITLE FIELD REP. II

DATE JUN 14 1995

NOT  
POSTED