

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO  
APPLICATION FOR MULTIPLE COMPLETION

Form C-107  
5-1-61

|                                                        |                  |                            |                        |                        |
|--------------------------------------------------------|------------------|----------------------------|------------------------|------------------------|
| Operator<br><u>Shell Oil Company</u>                   |                  | County<br><u>Lea</u>       |                        | Date<br><u>2-22-74</u> |
| Address<br><u>P. O. Box 1509, Midland, Texas 79701</u> |                  | Lease<br><u>Livingston</u> |                        | Well No.<br><u>3</u>   |
| Location of Well                                       | Unit<br><u>W</u> | Section<br><u>3</u>        | Township<br><u>21S</u> | Range<br><u>37E</u>    |

1. Has the New Mexico Oil Conservation Commission heretofore authorized the multiple completion of a well in these same pools or in the same zones within one mile of the subject well? YES X NO
2. If answer is yes, identify one such instance: Order No. MC-1089; Operator Lease, and Well No.: Shell Livingston No. 5

| 3. The following facts are submitted:                | Upper Zone       | Intermediate Zone | Lower Zone       |
|------------------------------------------------------|------------------|-------------------|------------------|
| a. Name of Pool and Formation                        | <u>Blinebry</u>  |                   | <u>Drinkard</u>  |
| b. Top and Bottom of Pay Section (Perforations)      | <u>5604-5951</u> |                   | <u>6450-6750</u> |
| c. Type of production (Oil or Gas)                   | <u>Oil</u>       |                   | <u>Oil</u>       |
| d. Method of Production (Flowing or Artificial Lift) | <u>Flowing</u>   |                   | <u>Flowing</u>   |

4. The following are attached. (Please check YES or NO)

| Yes                                 | No                       |                                                                                                                                                                                                                                                                                                                                                                                                 |
|-------------------------------------|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | a. Diagrammatic Sketch of the Multiple Completion, showing all casing strings, including diameters and setting depths, centralizers and/or turbolizers and location thereof, quantities used and top of cement, perforated intervals, tubing strings, including diameters and setting depth, location and type of packers and side door chokes, and such other information as may be pertinent. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | b. Plat showing the location of all wells on applicant's lease, all offset wells on offset leases, and the names and addresses of operators of all leases offsetting applicant's lease.                                                                                                                                                                                                         |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | c. Waivers consenting to such multiple completion from each offset operator, or in lieu thereof, evidence that said offset operators have been furnished copies of the application.*                                                                                                                                                                                                            |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | d. Electrical log of the well or other acceptable log with tops and bottoms of producing zones and intervals of perforation indicated thereon. (If such log is not available at the time application is filed it shall be submitted as provided by Rule 112-A.)                                                                                                                                 |

5. List all offset operators to the lease on which this well is located together with their correct mailing address.

Amoco Production Co., Box 68, Hobbs, New Mexico 88240

Texaco, Inc., P. O. Box 3109, Midland, Texas 79701

Continental Oil Co., P. O. Box 460, Hobbs, New Mexico 88240

Aztec Oil & Gas Co., 2000 First National Bank Bldg., Dallas, Texas 75202

Morris R. Antweil, Box 2010, Hobbs, New Mexico 88240

Summit Energy, Inc., 112 N. 1st, Artesia, New Mexico 88210

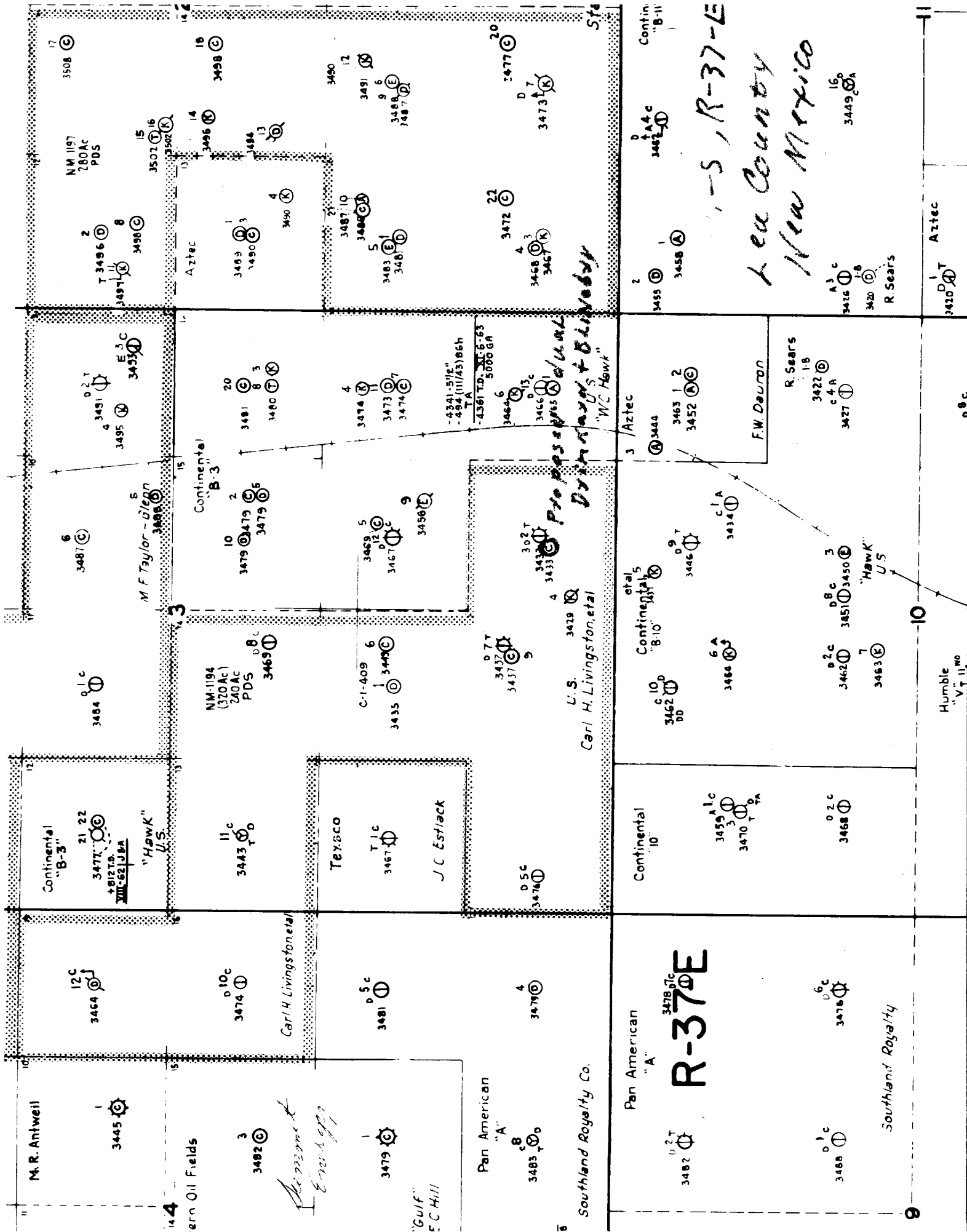
6. Were all operators listed in Item 5 above notified and furnished a copy of this application? YES X NO     . If answer is yes, give date of such notification 2-22-74.

CERTIFICATE: I, the undersigned, state that I am the Staff Production Engineer of the Shell Oil Company (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

N. W. Harrison  
Signature

\*Should waivers from all offset operators not accompany an application for administrative approval, the New Mexico Oil Conservation Commission will hold the application for a period of twenty (20) days from date of receipt by the Commission's Santa Fe office. If, after said twenty-day period, no protest nor request for hearing is received by the Santa Fe office, the application will then be processed.

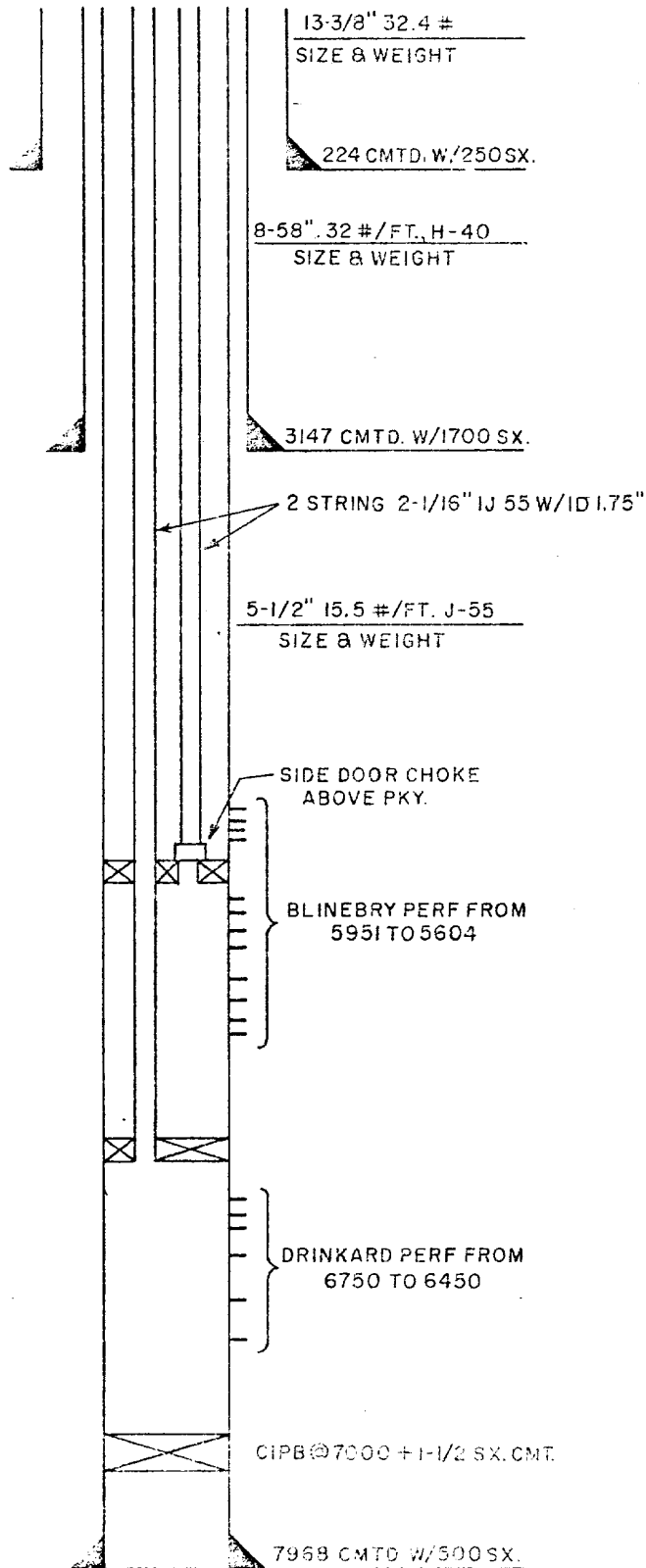
NOTE: If the proposed multiple completion will result in an unorthodox well location and/or a non-standard perforation unit in one or more of the producing zones, then separate application for approval of the same should be filed simultaneously with this application.



SHELL OIL COMPANY  
DUAL COMPLETE BLINEBRY & DRINKARD POOLS  
LIVINGSTON WELL NO.3

560' FSL & 2030 FEL, SEC.3, T-21-S, R-37-E  
LEA COUNTY, NEW MEXICO

DOWN HOLE DRAWING  
OF PROPOSED COMPLETION



ORIGINAL COMPLETION DATE 5-21-51  
ELEVATION 3433' DF  
TD 8094

PERF:

BLINEBRY: 5951, 5939, 5930, 5901, 5893, 5864, 5854,  
5745 TO 5708; 5642, 5636, 5628, 5620,  
5604

DRINKARD: 6750, 6741, 6733, 6726, 6719, 6707, 6700,  
6689, 6679, 6674, 6664, 6657, 6650, 6644,  
6632, 6607, 6591, 6583, 6570, 6559, 6553,  
6540, 6532, 6523, 6517, 6505, 6493, 6480,  
6469, 6464, 6450.

CSG: 13-3/8" CEMENT CIRCULATED  
8-5/8" CEMENT CIRCULATED  
5-1/2" CEMENT TOP BY FREEZE POINT  
4850'

No. 547993

Amoco Production Company  
STREET AND NO.  
Box 08  
P.O., STATE AND ZIP CODE  
Hobbs, New Mexico 88240  
OPTIONAL SERVICES FOR ADDITIONAL FEES  
RETURN RECEIPT SERVICES  
1. Shows to whom and date delivered ..... 15¢  
With delivery to addressee only ..... 65¢  
2. Shows to whom, date and where delivered ..... 35¢  
With delivery to addressee only ..... 85¢  
DELIVER TO ADDRESSEE ONLY ..... 50¢  
SPECIAL DELIVERY (extra fee required) .....  
PS Form 3800 NO INSURANCE COVERAGE PROVIDED— (See other side)  
Apr. 1971 NOT FOR INTERNATIONAL MAIL \* GPO : 1972 O - 460-743

No. 547995

RECEIPT FOR CERTIFIED MAIL—30¢ (plus postage)  
SENT TO  
Continental Oil Co.  
STREET AND NO.  
P. O. Box 460  
P.O., STATE AND ZIP CODE  
Hobbs, New Mexico 88240  
OPTIONAL SERVICES FOR ADDITIONAL FEES  
RETURN RECEIPT SERVICES  
1. Shows to whom and date delivered ..... 15¢  
With delivery to addressee only ..... 65¢  
2. Shows to whom, date and where delivered ..... 35¢  
With delivery to addressee only ..... 85¢  
DELIVER TO ADDRESSEE ONLY ..... 50¢  
SPECIAL DELIVERY (extra fee required) .....  
PS Form 3800 NO INSURANCE COVERAGE PROVIDED— (See other side)  
Apr. 1971 NOT FOR INTERNATIONAL MAIL \* GPO : 1972 O - 460-743

No. 547996

RECEIPT FOR CERTIFIED MAIL—30¢ (plus postage)  
SENT TO  
Aztec Oil & Gas Co.  
STREET AND NO.  
2000 First National Bank Bldg  
P.O., STATE AND ZIP CODE  
Dallas, Texas 75202  
OPTIONAL SERVICES FOR ADDITIONAL FEES  
RETURN RECEIPT SERVICES  
1. Shows to whom and date delivered ..... 15¢  
With delivery to addressee only ..... 65¢  
2. Shows to whom, date and where delivered ..... 35¢  
With delivery to addressee only ..... 85¢  
DELIVER TO ADDRESSEE ONLY ..... 50¢  
SPECIAL DELIVERY (extra fee required) .....  
PS Form 3800 NO INSURANCE COVERAGE PROVIDED— (See other side)  
Apr. 1971 NOT FOR INTERNATIONAL MAIL \* GPO : 1972 O - 460-743

No. 547997

RECEIPT FOR CERTIFIED MAIL—30¢ (plus postage)  
SENT TO  
Morris R. Antwei 1  
STREET AND NO.  
Box 2010  
P.O., STATE AND ZIP CODE  
Hobbs, New Mexico 88240  
OPTIONAL SERVICES FOR ADDITIONAL FEES  
RETURN RECEIPT SERVICES  
1. Shows to whom and date delivered ..... 15¢  
With delivery to addressee only ..... 65¢  
2. Shows to whom, date and where delivered ..... 35¢  
With delivery to addressee only ..... 85¢  
DELIVER TO ADDRESSEE ONLY ..... 50¢  
SPECIAL DELIVERY (extra fee required) .....  
PS Form 3800 NO INSURANCE COVERAGE PROVIDED— (See other side)  
Apr. 1971 NOT FOR INTERNATIONAL MAIL \* GPO : 1972 O - 460-743

No. 54 998

RECEIPT FOR CERTIFIED MAIL—30¢ (plus postage)  
SENT TO  
Summit Energy, Inc.  
STREET AND NO.  
112 N. 1st Street  
P.O., STATE AND ZIP CODE  
Artesia, New Mexico 88210  
OPTIONAL SERVICES FOR ADDITIONAL FEES  
RETURN RECEIPT SERVICES  
1. Shows to whom and date delivered ..... 15¢  
With delivery to addressee only ..... 65¢  
2. Shows to whom, date and where delivered ..... 35¢  
With delivery to addressee only ..... 85¢  
DELIVER TO ADDRESSEE ONLY ..... 50¢  
SPECIAL DELIVERY (extra fee required) .....  
PS Form 3800 NO INSURANCE COVERAGE PROVIDED— (See other side)  
Apr. 1971 NOT FOR INTERNATIONAL MAIL \* GPO : 1972 O - 460-743

547999

RECEIPT FOR CERTIFIED MAIL—30¢ (plus postage)  
SENT TO  
Texaco, Inc.  
STREET AND NO.  
P. O. Box 3109  
P.O., STATE AND ZIP CODE  
Midland, Texas 79701  
OPTIONAL SERVICES FOR ADDITIONAL FEES  
RETURN RECEIPT SERVICES  
1. Shows to whom and date delivered ..... 15¢  
With delivery to addressee only ..... 65¢  
2. Shows to whom, date and where delivered ..... 35¢  
With delivery to addressee only ..... 85¢  
DELIVER TO ADDRESSEE ONLY ..... 50¢  
SPECIAL DELIVERY (extra fee required) .....  
PS Form 3800 NO INSURANCE COVERAGE PROVIDED— (See other side)  
Apr. 1971 NOT FOR INTERNATIONAL MAIL \* GPO : 1972 O - 460-743