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 1 P.O. Box 1980, Hobba, NM 88240 OIL CONSERVATION DIVISIO P.O. Box 2088	WELL API NO. 30-025-06520
DISTRICT II P.O. Drawer DD, Artesia, NM 88210  Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lesse STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	6. State Oil & Gas Lease No.
CUNDRY NOTICES AND DEPORTS ON WELLS	
SUNDRY NOTICES AND REPORTS ON WELLS  ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  (FORM C-101) FOR SUCH PROPOSALS.)	7. Lease Name or Unit Agreement Name NORTHEAST DRINKARD UNIT
1. Type of Well: OL. CAS WELL X WELL OTHER	
2. Name of Operator Sholl Worstorn ERP Inc.	8. Well No.
Shell Western E&P Inc. 3. Address of Operator	9. Pool name or Wildcat
P.O. Box 576 Houston, TX 77001-0576 (WCK 4435)	N. EUNICE BLINEBRY-TUBB-DRNKRD
Unit Letter V: 915 Feet From The SOUTH Line and  Section 3 Township 21S Range 37E  10. Elevation (Show whether DF, RKB, RT, GR, etc.)	NMPM LEA County
//////////////////////////////////////	
Check Appropriate Box to Indicate Nature of Notice NOTICE OF INTENTION TO:	ce, Report, or Other Data SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR	
	ND CEMENT JOB
	OG, OAP & ACD X
<ul> <li>12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates work) SEE RULE 1103.</li> <li>12-04 TO 12-13-90:</li> <li>POH W/PROD EQUIP. CO TO 6615' (TAG FILL). RUN NGT &amp; CNL LOGS FROM RETAGGED @ 6615'. ATTMPTD TO ESTAB CIRC W/5 SX OYSTER SHELLS, COBY DRY DRLG. ATTMPTD TO MILL/WASH OVER MDL D PKR @ 6645', COULD IN HOLE. PERF'D BLINEBRY/TUBB/DRINKARD 5702' - 6525' (2 JSPF). ACI 6525' W/4200 GALS 15% HCL + 1500# ROCK SALT. INST PROD EQUIP &amp; RI</li> </ul>	M 6584' TO 5000'. COULD NOT. CO TO 6647' D NOT. LEFT 12' OF FILL D PERFS 5558' —
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
HONATURE TITLE REGULATOR	RY SUPV. DATE 2/28/91
TYPEOR PRINT NAME J. H. SMITHERMAN	TELEPHONE NO. 713/870-3
(This space for State Use) White A to the Annual State Company of the Annual State Com	MAR 0 5 1991
APTROVED BY TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:	