

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 88240

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.
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
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

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

3. Address of Operator
P. O. BOX 576, HOUSTON, TX 77001 (WCK 4435)

4. Well Location
Unit Letter P : 990 Feet From The SOUTH Line and 990 Feet From The EAST Line

Section 15 Township 21S Range 37E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3412' GR

7. Lease Name or Unit Agreement Name
NORTHEAST DRINKARD UNIT

8. Well No.
710

9. Pool name or Wildcat
NORTH EUNICE BLINEBRY-TUBB-
DRINKARD OIL & GAS

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: CMT SQZ; OAP; ACD TREAT <input checked="" type="checkbox"/>

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.

2-18-89 TO 3-29-89

POH WITH PROD EQUIP. RIH WITH PKR & SET @ 5675'. ESTABLISHED INJ RATE. POH WITH PKR. RIH WITH CCCR & SET @ 5689'. SQZD BLINEBRY 5729-5962' WITH 200 SX CLASS C CMT. TAGGED TOP OF CMT @ 5685' (PBTD). RIH WITH PKR & SET @ 5453'. DUMPED 175 GAL 15% HCL DOWN TBG. PERFED BLINEBRY 5526-5627' WITH 1 JSPF. RIH WITH PROD EQUIP. RETD TO PROD.

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

SIGNATURE J. H. Smitherman TITLE PROD. ADMIN. ADVISOR DATE MAY 08 1989
TYPE OR PRINT NAME J. H. SMITHERMAN (713) 870-3797 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

MAY 15 1989

DISTRICT I
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WELL API NO.
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. 710
9. Pool name or Wildcat NORTH EDNICE BLINEBRY-TUBB- DRINKARD OIL & GAS
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3412' GR

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 checked="" type="checkbox"/> OTHER	2. Name of Operator SHELL WESTERN E & P INC. (4431 WCK)
3. Address of Operator P.O. BOX 576, Houston, TX 77001-0576	4. Well Location Unit Letter <u>P</u> : <u>990</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>East</u> Line Section <u>15</u> Township <u>21-S</u> Range <u>37-E</u> NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3412' GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: CMT SQZ, PERF, AT <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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) CO to 6000'.
- 2) Sqz Blinebry 5729' - 5962' w/ 100 sxs class "C" cmt + .3% Halad-9 followed by 50 sxs class "C" cmt + 2% CaCl₂ w/ cmt retainer set @ 5675'.
- 3) TIH w/ prod string, setting Baker model R pkr @ +/-5450'.
- 4) Perf Blinebry 5526' - 5627' w/ 1JSPF.
- 5) AT Blinebry 5526' - 5627' w/ 2100 gals 15% NEFE HCl + 24 ball sealers.
- 6) Open prod line and file C-122.

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

SIGNATURE A.J. FORE TITLE SUPV. REG. & PERMITTING DATE FEB 3 1989
TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE FEB 09 1989
CONDITIONS OF APPROVAL, IF ANY: _____

041 20 241

RECEIVED FROM
WATERLOO, ONT.

RECEIVED

FEB 8 1953

ODD
HOBS OFFICE