	***			-+
Submit 3 Copies to Appropriate	State of New Mexico Energy, Minerals and Natural Resources Department		Form C-103 Revised 1-1-89	
District Office  DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088			25-06606
DISTRICT II P.O. Drawer DD, Artesia, NM 88210		5. Indicate Type of Leas	STATE FEE X	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Leas	: Na.
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.)			7. Lease Name or Unit 1	Agreement Name
1. Type of Well:		0.0110.05	ADCO	
MEIT MEIT X	& OTHER WATER	SOURCE	ARGO 8. Well No.	÷
2. Name of Operator SHELL WESTERN E&P IN	IC.		9. Pool name or Wildca	
3. Address of Operator	/1101/ 4	1251	HARE-SAN AN	4
P. O. BOX 576, HOUST	TON, TX 77001 (WCK 4	435)	I TIANL-SAIL ALL	
4. Well Location	80 Feet From The SOUTH	Line and 76	O Feet From The	WEST Line
Unit Letter :	•		1	EA County
Section 15	Township 21S Ra		NMPM L	
	10. Elevation (Show whether 3453 ' DF	Dr, AAB, RI, OR, CC.,		
	Appropriate Box to Indicate 1	Nature of Notice, R	eport, or Other Da	ta
NOTICE OF IN		I SUB	SEQUENT REP	ORT OF:
. NOTICE OF IN	<del></del> 7		•	ERING CASING
PERFORM REMEDIAL WORK	PLUG AND ABANDON L	REMEDIAL WORK		IG AND ABANDONMENT
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING		G AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND C		AN ANDRES IX
OTHER:		OTHER: PB & RE	COMPLETED TO SA	AN ANDRES LA
12. Describe Proposed or Completed Oper	viene (Clearly state all pertinent details, a	and give pertinent dates, incli	iding estimated date of star	ting any proposed
work) SEE RULE 1103.	anons (Cieury since an permanent,	•		
4-28 to 5-11-89:				
POH w/prod equip. CO t Capped CIBP w/35' cmt. RBP. Perf'd San Andres HCl. Installed prod ec	o 6400'. Set CIBP @ 6 Set RBP @ 2715'. Rep 4016' - 4941' (1 JSPF Juip & retd well to pro	). Acd perfs 4	NL/CCL from 51 -5/8" csg & we 016' - 4941' w	00' to 3900'. 11 flg. POH w/ /11,970 gals 15%
	en t			:
				,
			•	
I hereby certify that the information above is	true and complete to the best of my knowledge a	nd belief.		7 40 00
MA An	themar.	REGULATORY	SUPV.	<sub>- рате</sub> <u>7 - 13-89</u>
SKINATURE	<u> </u>	•	713) 870-3797	TELEPHONE NO.
TYPEORPRINTNAME J. H. SM	<u> THERMAN</u>		113) 010-3131	JUL 1 8 1989
				00F 10 1000

(This space for State Use) INAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR

APPROVED BY-

CONDITIONS OF APPROVAL, IF ANY: