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LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

JUN 15 11 55 AM '66

5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No. -
7. Unit Agreement Name -
8. Farm or Lease Name Argo A
9. Well No. 12
10. Field and Pool, or Wildcat Blinberry (Gas)
12. County Lea

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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Shell Oil Company (Western Division)
3. Address of Operator P. O. Box 1509, Midland, Texas 79701
4. Location of Well UNIT LETTER E , 2310 FEET FROM THE north LINE AND 760 FEET FROM THE west LINE, SECTION 22 TOWNSHIP 21S RANGE 37E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3431' DF

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER **Temporarily Abandoned** ☒

17. 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.

Well still temporarily abandoned as reported on Form C-103, approved November 24, 1965.

No plans for changing well status in near future.

THE COMMISSION MUST BE NOTIFIED
MONTHS ON FOR
THE WELL STATUS
FOR THIS

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

Original Signed By

N. W. Harrison

SIGNED **N. W. Harrison** TITLE **Senior Exploitation Engineer** DATE **June 6, 1966**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: