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NEW MEXICO OIL CONSERVATION COMMISSION

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

| | |
|--------------------------------|---|
| 5a. Indicate Type of Lease | |
| State <input type="checkbox"/> | Fee <input checked="" type="checkbox"/> |
| 5. 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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 7. Unit Agreement Name |
| 2. Name of Operator Shell Oil Company | | 8. Farm or Lease Name Arg "A" |
| 3. Address of Operator P. O. Box 1858 Roswell, New Mexico | | 9. Well No. 12 |
| 4. Location of Well UNIT LETTER E , 2310 FEET FROM THE north LINE AND 760 FEET FROM THE west LINE, SECTION 22 TOWNSHIP 21-S RANGE 37-E NMPM. | | 10. Field and Pool, or Wildcat Blinbry |
| 15. Elevation (Show whether DF, RT, GR, etc.) 3431' dr | | 12. County Lea |

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 ☐

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.

Operation: April 13 thru 15, 1965

Rigged up unit and lowered Sweet HD-100 Packer and reset at 5896'.
Ran 190 joints (5790') 2", EUE, 8rd, tubing and hung at 5902'.
Swabbed well.
Attempt to reduce GOR unsuccessful.

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

Original Signed By
C. R. Coffey

C. R. Coffey

Acting District
Exploitation Engineer

DATE **April 20, 1965**

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: