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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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator <b>Shell Oil Company</b>		8. Farm or Lease Name <b>Turner</b>
3. Address of Operator <b>P. O. Box 1509, Midland, Texas 79701</b>		9. Well No. <b>6</b>
4. Location of Well UNIT LETTER <b>M</b> , <b>660</b> FEET FROM THE <b>south</b> LINE AND <b>660</b> FEET FROM THE <b>west</b> LINE, SECTION <b>22</b> TOWNSHIP <b>21-S</b> RANGE <b>37-E</b> N.M.P.M.		10. Field and Pool, or Wildcat <b>Blinebry Gas</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3432' DF</b>		12. County <b>Lea</b>

16.

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

#### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

#### SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> <b>SI</b>

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 SI and allowable transferred to Well #13-Turner Lease, Blinebry Gas  
effective August 1, 1969**

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

SIGNED <u><i>J.R. Miller</i></u> <b>J.R. Miller</b>	TITLE <u><b>Acting Division Prod. Supt.</b></u>	DATE <u><b>November 5, 1969</b></u>
APPROVED BY <u><i>J.R. Miller</i></u>	TITLE <u><b>SUPERVISOR DISTRICT 1</b></u>	DATE <u><b>NOV 5 1969</b></u>
CONDITIONS OF APPROVAL, IF ANY:		