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HOBBS OFFICE O. C. C.
 NEW MEXICO OIL CONSERVATION COMMISSION
 DEC 15 11 31 AM '65

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

5a. Indicate Type of Lease
 State Fee
 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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name -
2. Name of Operator Shell Oil Company - Western Division	8. Farm or Lease Name Turner
3. Address of Operator Box 1509 - Midland, Texas	9. Well No. 11
4. Location of Well UNIT LETTER N , 915 FEET FROM THE south LINE AND 1650 FEET FROM THE west LINE, SECTION 22 TOWNSHIP 21 RANGE 37 NMPM.	10. Field and Pool, or Wildcat Blinebry
15. Elevation (Show whether DF, RT, GR, etc.) 3420' DF	12. County Lea

16. 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 checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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: December 1 thru December 5, 1965

1. Killed well.
2. Lowered packer 151' & reset at 5838'. Hung tubing at 5936'.
3. Swabbed well.
4. In 17 hours flowed 72 BO thru 20/64" choke. FTP 625 psi. CP 900 psi
5. Operation unsuccessful.

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

SIGNED Original Signed By N. W. Harrison **N. W. Harrison** TITLE **District Exploitation Engr.** DATE **Dec. 9, 1965**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: