

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-06757
5. Indicate Type of Lease STATE ☐ FEE ☒
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name NORTHEAST DRINKARD UNIT
8. Well No. 908
9. Pool name or Wildcat NORTH EUNICE BLINEBRY-TUBB-DRINKARD OIL & GAS

1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER ☐
2. Name of Operator SHELL WESTERN E&P INC.
3. Address of Operator P. O. BOX 576, HOUSTON, TX 77001 (WCK 4435)
4. Well Location Unit Letter 0 : 990 Feet From The SOUTH Line and 2310 Feet From The EAST Line Section 22 Township 21S Range 37E NMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3416' DF

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	OTHER: OAP & ACD ☒

12. 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.

6-22 to 6-26-89:

POH w/prod equip. Tagged fill @ 6666'. CO to 6641' (PBTD). Perf'd Blinebry/Tubb 5670' - 6008' (1 JSFF). Acd Blinebry/Tubb/Drinkard perms 5670' - 6610' w/7980 gals 15% NEFE HCl + 1000# rock salt. Installed prod equip & ret'd to prod.

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

SIGNATURE *J. H. Smitherman* TITLE **REGULATORY SUPV.** DATE **8-4-89**

TYPE OR PRINT NAME **J. H. SMITHERMAN** (713) 870-3797 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

AUG 8 1989