## 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 P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION

P.O. Box 2088

WELL API NO.		
5. Indicate Type of Lease	FEE	X

STATE

Santa Fe, New Mexico 87504-2088 DISTRICT II FEE L P.O. Drawer DD, Artesia, NM 88210 6. State Oil & Gas Lease No 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.) NORTHEAST DRINKARD UNIT Type of Well: WELL X WELL. 8. Well No. Name of Operator 917 SHELL WESTERN E&P INC BLINEBRY-TUBB-3. Address of Operator (WCK 4435) P. O. BOX 576, HOUSTON, TX 77001 4. Well Location 330 Feet From The SOUTH 2310 Feet From The LEA County NMPM 37E 218 Range Township 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3405' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING REMEDIAL WORK PLUG AND ABANDON PERFORM REMEDIAL WORK PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. CHANGE PLANS TEMPORARILY ABANDON

OAP & Acdz OTHER: 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.

X

OTHER:

CASING TEST AND CEMENT JOB

1. POH W/prod equip.

PULL OR ALTER CASING

2. CO to PBTD (cmt-copped CIBF @ 6685').

3. Perf Blinebry/Tubb/Drinkard 5674'-6672' (2 JSPF).
4. Acdz perfs 5674'-6672' W/11,970 gals 15% NEFE HCI.
5. Install prod equip & ret to prod.

I hereby certify that the information above is true and complete to the best of my knowledge and believe to the best of my knowledge and believe the best of my	REGULATORY SUPV.	_ DATE
SIGNATURE CMITTLE DMAN	(713) 870-3797	TELEPHONE NO.
TYPEORPRINTNAME J. H. SMITHERMAN		DEC 2 9 1989

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTOM DISTRICT I SUPERVISOR

DEC 2 8 1989 OCD MOBBS OFFICE