

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.

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.

816

9. Pool name or Wildcat
NORTH EUNICE BLINEBRY-TUBB-
DRINKARD OIL & GAS

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. 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 A : 660 Feet From The NORTH Line and 760 Feet From The EAST Line

Section 23

Township 21S

Range 37E

NMPM

LEA

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3411' GR

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: CO, OAP & Acdz ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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.

1. POH w/prod equip.

2. CO to $\pm 6405'$.

3. Cut over Md1 "D" PKr @ 6410'. TOH w/pkr remnants & 1 jt underlying tailpipe.

4. CO to PBTD (6902').

5. Run GR/CCL log from 6750' to 5550'.

6. Perf Blinebry/Tubb/Drinkard 5711' - 6691' (1 JSPF).

7. Acdz perfs 5711' - 6691' w/9240 gal 15% NEFE HCl + 750# rock salt.

8. Install prod equip & ret well to prod.

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

SIGNATURE

W. F. N. Kelldorf

TITLE STAFF PRODUCTION ENGINEER

DATE 6-9-89

TYPE OR PRINT NAME

W. F. N. KELLDORF

(713) 870-3797

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

JUN 15 1989

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: