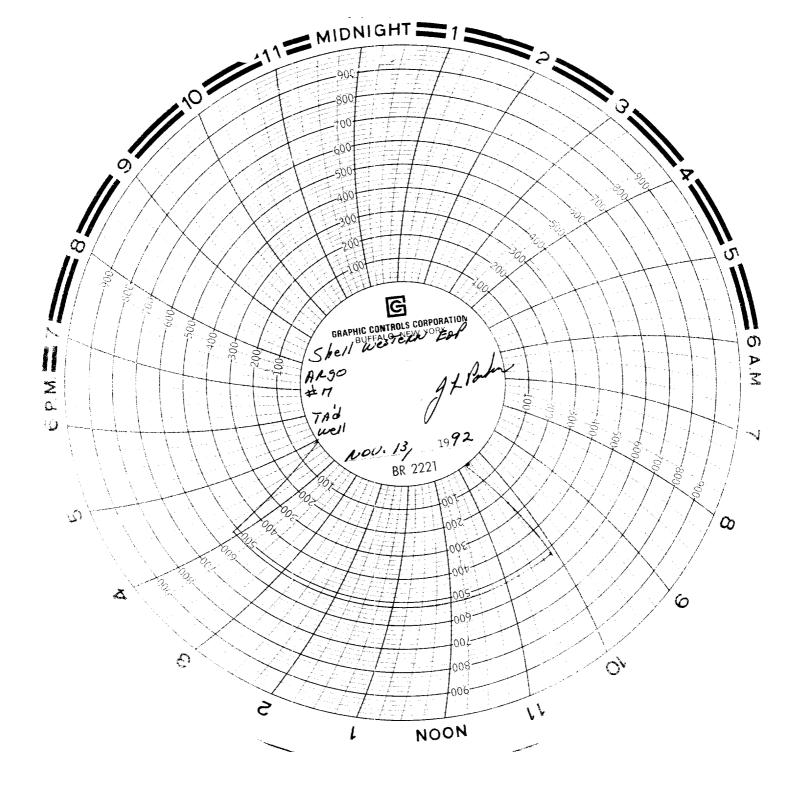
State of New Mexico

Submit 3 Copies to Appropriate District Office	Energy, Minerals and Nature! Res	sources Department	Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION P.O. Box 208	1 7	VELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico	87504-2088	5. Indicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410			STATE FEE X 6. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR PI DIFFERENT RESI (FORM	TICES AND REPORTS ON WELL ROPOSALS TO DRILL OR TO DEEPEN (ERVOIR. USE "APPLICATION FOR PER C-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name ARGO
1. Type of Well: OL GAS WELL X WELL	OTHER		
2. Name of Operator			8. Well No.
Shell Western E&P Inc.			7
3. Address of Operator		i	9. Pool name or Wildcat
P.O. Box 576 Houston,	TX 77001-0576		DRINKARD
4. Well Location	2310 Fast From The SOUTH	••	990 Feet From The WEST Line
Unit Letter :2	2310 Feet From The SOUTH	Line and	990 Feet From The WEST Line
	Township 21S Ran 10. Elevation (Show whether I 3457' DF k Appropriate Box to Indicate I NTENTION TO:	DF, RKB, RT, GR, etc.) Nature of Notice, Rep	port, or Other Data
r-n		REMEDIAL WORK	ALTERING CASING
PERFORM REMEDIAL WORK TEMPORARILY ABANDON	PLUG AND ABANDON L	COMMENCE DRILLING	
PULL OR ALTER CASING		CASING TEST AND CEN	
OTHER:		1	G (FOR EXTENSION OF TA STATUS)
12. Describe Proposed or Completed Opwork) SEE RULE 1103.	perations (Clearly state all pertinent details, as	l ad give pertinent dates, includi	ng estimated date of starting any proposed
11-13-92:			
RETSTD CSG TO 500# FOR 3	0 MIN, HELD. (CHART ATTACHE	D)	
PURSUANT TO THE PROVISION TEMPORARY ABANDONMENT	NS OF NMOCD RULE 203, SHELL STATUS FOR A PERIOD OF FIVE Y	WESTERN HEREBY RI YEARS.	EQUESTS AN EXTENSION OF
	s true and complete to the best of my knowledge and		
MONATURE OF THE	10 Winkly IT	TECH. MANAGER	- ENVIR. ENG. DATE 11/20/92

TELEPHONE NO. 713/870-3797 (This space for State USRIGINAL SIGNED BY JERRY SEXTON NOV 24'92 DISTRICT I SUPERVISOR DATE -APPROVED BY --This Approval of Temporary Abandonment Expires CONDITIONS OF APPROVAL, IF ANY:



_ , ,	State of New Mex	cico .	Form C-103
Submit 5 Copies to Appropriate District Office	Energy, Minerals and Natural Resources Department		Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO. 30-025-09915
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 8	87504-2088	5. Indicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	en de la companya de		6. State Oil & Gas Lease No.
SUMPRY NOT	ICES AND REPORTS ON WELL	LS	
(DO NOT USE THIS FORM FOR PRODIFFERENT RESERVED.)	7. Lease Name or Unit Agreement Name		
1. Type of Well:			ARGO
WEIL X WEIL	OTHER		8. Well No.
2. Name of Operator	NC .		7
SHELL WESTERN E&P I	NC.		9. Pool name or Wildcat
3. Address of Operator	TON, TX 77001 (WCK 4	435) ·	DRINKARD
P. O. BOX 576, HOUS	TON, TA TYOUT (NOW)		
1 22	10 Feet From The SOUTH	Line and99	O Feet From The WEST Line
Unit Letter: 23			
Section 15	Township 21S Ra		NMPM LEA County
	10. Elevation (Show whether)	DF, RKB, KI, GK, etc.)	· ////////////////////////////////////
(haals	Appropriate Box to Indicate I	Nature of Notice, R	eport, or Other Data
NOTICE OF IN		SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	G OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB
PULL OR ALTER CASING			TA'd X
OTHER:		OTHER:	
12. Describe Proposed or Completed Opework) SEE RULE 1103.			apped w/35' cmt, fres tstd etstd csg to 500# for 15 min,

I hereby certify that the information ab	ove is true and complete to the best of my knowledge an	d belief.	10 24-80		
	Am theman	REGULATORY SUPV.	_ DATE		
SIGNATURE /	/ / ffin/v	• •			
TYPEOR PRINT NAME J. H.	SMITHERMAN	(713) 870-3797	TELEPHONE NO.		
(This space for State Use)	Ouise Sismad has	•	OCT 2.7 1989		

- TITLE -

(Turn abuce for porce one

Orig. Signed by
Paul Kautz
Geologist

001 27 1989

CONDITIONS OF APPROVAL, IF ANY:

To experien 11-1-90