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CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210		WELL API NO.
		30-025-09916
		5. Indicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON W (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEP! DIFFERENT RESERVOIR. USE "APPLICATION FOR P (FORM C-101) FOR SUCH PROPOSALS.)	EN OH PLUG BACK TO A	7. Lease Name or Unit Agreement Name
1. Type of Well: OIL OAS WELL X WELL OTHER		NORTHEAST DRINKARD UNIT
2. Name of Operator		8. Well No. 701
SHELL WESTERN E&P INC. 3. Address of Operator P. O. BOX 576, HOUSTON, TX 77001 (WCK)	4435)	9. NORTH FUNICE BLINEBRY-TUBB- DRINKARD OIL & GAS
4. Well Location Unit Letter L: 1980 Feet From The SOUTH	Line and	660 Feet From The WEST Line
Section 15 Township 21S 10. Elevation (Show when a state of the state	Range 37E her DF, RKB, RT, GR, etc.)	NMPM LEA County
11. Check Appropriate Box to Indicate	te Nature of Notice, F	Report, or Other Data
NOTICE OF INTENTION TO:	SUE	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLIN	
PULL OR ALTER CASING	CASING TEST AND C	EMENI JOB []
OTHER: CMT SQZ, CO, OAP & ACDZ		
12 Describe Proposed or Completed Operations (Clearly state all persisent details work) SEE RULE 1103. 1. POH w/prod equip. 2. CO to PBTD (6065'). 3. Set CIBP @ 5690' & pkr @ 5500'. 4. Sqz Blinebry perfs 5519' - 5670' w/50 Cls "C" cmt + 2% CaCl2. WOC 24 hrs. 5. DO cmt to CIBP @ 5690'. Pres tst sqz CIBP & CO to 6651'. 6. Perf Blinebry/Tubb/Drinkard 5868' - 667. Acdz perfs 5695' - 6606' w/9450 gals 18. Install prod equip & ret well to prod.	sx Cls "C" cmt + to 500#. DO CIB 06' (2 JSPF). 5% NEFE HCl + 75	0.3% CF-1 followed by 50 sx P & cmt to CIBP @ 6065'. D0
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I hereby certify that the information above is true and complete to the best of my knowledge	REGULATORY	SUPV. 0ATE 9-22-89
SIONATURE		713)_870-3797 TELEPHONE NO.
TYPEORPRINTNAME J. H. SMITHERMAN		
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR		SEP 2 6 198

BECEIVED

SEP 25 1989

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