

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

IL 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.

803

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 ☒ Injector

2. Name of Operator

SHELL WESTERN E & P INC. (4431 WCK)

3. Address of Operator

P.O. BOX 576, Houston, TX 77001-0576

4. Well Location

Unit Letter C : 660 Feet From The North Line and 1980 Feet From The West Line

Section 22

Township

21-S

Range

37-E

NMPM

LEA

County

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

3416' 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: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: OAP, AT / CTI ☒

R. 8541

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.

2-18-89 thru 2-24-89:

POOH w/ prod equip. Perf Tubb 5998' - 6048' w/ 1JSPF. AT Tubb 5998' - 6048' w/
1050 gals 15% NEFE Hcl acid + 32 ball sealers, using RBP and pkr. TIH w/ inj equip,
setting Guiberson Uni-VI pkr @ 5660'. Pres test to 500 psi for 30 min - held O.K.
Placed well on injection.

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

SIGNATURE *W.F.N. Kelldorf* for W.F.N. KELLDORF

TITLE STAFF PRODUCTION ENGINEER

DATE APR 17 1989

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APR 24 1989

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: