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HOBBS OFFICE O. C. C.
NEW MEXICO OIL CONSERVATION COMMISSION
Jun 26 9 00 AM '67

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-1167	

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name -
2. Name of Operator Shell Oil Company (Western Division)	8. Farm or Lease Name State "B"
3. Address of Operator P.O. Box 1509, Midland, Texas 79701	9. Well No. 1
4. Location of Well UNIT LETTER D , 660 FEET FROM THE north LINE AND 660 FEET FROM THE west LINE, SECTION 29 TOWNSHIP 21S RANGE 36E NMPM.	10. Field and Pool, or Wildcat Eumont
15. Elevation (Show whether DF, RT, GR, etc.) 3663' DF	12. County Lea

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

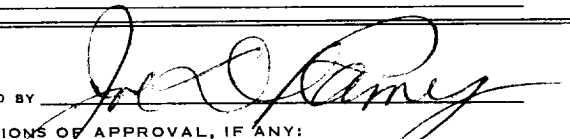
REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Temporarily Abandoned

17. 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.

Well still temporarily abandoned as reported on Form C-103, approved February 9, 1959
No plans for changing well status in near future.

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

Original Signed By **N. W. Harrison** TITLE **Staff Exploitation Engineer** DATE **June 21, 1967**

APPROVED BY  TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: