

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.
30-025-30913

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-935

7. Lease Name or Unit Agreement Name
NORTHEAST DRINKARD UNIT

8. Well No.
514

9. Pool name or Wildcat
N. EUNICE B-T-D 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 77001-0576

4. Well Location
Unit Letter L : 2010 Feet From The SOUTH Line and 660 Feet From The WEST Line

Section 10 Township 21S Range 37E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3461' 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: REQUEST FOR EXTENSION OF DRLG PERMIT ☒

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.

SHELL WESTERN HEREBY REQUESTS A SIX-MONTH EXTENSION OF THE EXISTING PERMIT
TO DRILL (CURRENTLY EXPIRES 11/18/90). WE ARE FORECASTING A JANUARY 1991
SPUD DATE.

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

SIGNATURE J. H. Smitherman TITLE REGULATORY SUPV. DATE 10-02-90
TYPE OR PRINT NAME J. H. SMITHERMAN TELEPHONE NO. (713) 870-3797

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE 10/10/90

CONDITIONS OF APPROVAL, IF ANY:

Expires 5/18/91

RECEIVED

OCT 04 1990

OFFICE
HODGE