

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

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

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. Unit Agreement Name
2. Name of Operator Shell Oil Company		8. Farm or Lease Name Rinewalt
3. Address of Operator P. O. Box 1509, Midland, Texas 79701		9. Well No. 4
4. Location of Well UNIT LETTER C 760 FEET FROM THE North LINE AND 1980 FEET FROM West LINE, SECTION 4 TOWNSHIP 22S RANGE 37E NMPM.		10. Field and Pool, or Wildcat Drinkard
15. Elevation (Show whether DF, RT, GR, etc.) 3462 DF		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER **Open Drinkard Zone** ☒

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.

2-13-73 to 2-20-73

1. Perforated 5 1/2" casing at 6360, 6374, 6385, 6394, 6426, 6438, 6450, 6461, 6472, 6479, 6488, 6497, 6506, 6522, 6537, 6557, 6566, 6574, 6586, 6600 (20 holes) with 1 JSPP.
2. Acid treated 6360-6600 with 6000 gal 15% NEA.
3. Fracture treated with 20,000 gal gelled lease crude + 1 1/2# sand/gal + Mark II adomite.
4. Set Baker Model D packer at 6335'. Drinkard tubing: 201 jts 2 1/16" set in packer at 6335'. Tubb tubing: 195 jts 2 1/16" hung at 6214'.
5. Placed on production.

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

SIGNED *A. E. Cordray* TITLE **A. E. Cordray
Staff Engineer** DATE **3-7-73**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: