

**Shell Western E&P Inc.**

An affiliate of Shell Oil Company



P.O. Box 576  
Houston, TX 77001

May 5, 1993

State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division  
P. O. Box 2088  
Santa Fe, NM 87504-2088

Gentlemen:

SUBJECT: UNORTHODOX WELL LOCATION  
NORTH HOBBS (GB/SA) UNIT  
SECTION 32, WELL NO. 144  
T18S-R38E  
HOBBS (GB/SA) POOL  
LEA COUNTY, NEW MEXICO  
(REF: ADMINISTRATIVE ORDER NSL-3148 GRANTED 8/20/92)

Pursuant to the provisions of Rule 104-F and Division Order No. R-6199, Shell Western E&P Inc. (SWEPI) respectfully requests administrative approval to drill the subject well at an unorthodox location within the city limits of Hobbs, New Mexico where surface use restrictions prevent drilling at an orthodox location. Additional surface use restrictions imposed by the surface owner necessitated the restaking of the well location. Directional drilling to a legal bottom-hole location is not feasible due to the exorbitant, incremental costs involved. The well will be located less than the minimum 330 feet from the 40-acre proration unit, but is orthodox in all other respects. The certified plat submitted within this application indicates the proposed location.

The proposed location for Well No. 144 is also necessary to complete an efficient production and injection pattern, thereby maximizing oil recovery in areas where waterflood oil will be bypassed with the current injection-production well configuration. A project plat identifying all producing and injection wells therein is attached, and the information is hereby certified as current and correct.

By copy of this letter and attachments, we have notified the offset operator shown on the attached service list by certified mail.

Should you have any questions, please contact Marcus Winder at 713-544-3797.

Very truly yours,

A handwritten signature in cursive script, appearing to read "J. L. Morris".

J. L. Morris, Technical Manager  
Asset Administration-West Texas Asset  
Continental Division

JMW:rlb

Attachments

cc: State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division  
P. O. Box 1980  
Hobbs, NM 88241-1980

Submit to Appropriate  
District Office  
State Lease - 6 copies  
Fee Lease - 5 copies

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-101  
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

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

API NO. (assigned by OCD on New Wells)

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☒

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☐

b. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER ☐

SINGLE  
ZONE ☒

MULTIPLE  
ZONE ☐

2. Name of Operator

SHELL WESTERN E&P INC.

3. Address of Operator

P. O. BOX 576, HOUSTON, TX 77001 (WCK 4465)

7. Lease Name or Unit Agreement Name

N. HOBBS (G/SA) UNIT  
SECTION 32

8. Well No.

144

9. Pool name or Wildcat

HOBBS (G/SA)

4. Well Location

Unit Letter M : 786 Feet From The SOUTH Line and 1175 Feet From The WEST Line

Section 32 Township 18S Range 38E NMPM LEA County

10. Proposed Depth

4400'

11. Formation

SAN ANDRES

12. Rotary or C.T.

ROTARY

13. Elevations (Show whether DF, RT, GR, etc.)

3627.4' GR

14. Kind & Status Plug. Bond

BLANKET

15. Drilling Contractor

NORTON DRLG CO.

16. Approx. Date Work will start

9/15/93

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	13-3/8"	CONDR	40'	60	SURF
12-1/4"	9-5/8"	32.3#	1715'	700	SURF
8-3/4"	7"	20 & 23#	4400'	1050	SURF

BOP PROGRAM: 2000# ram preventer

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE

*J. Morris Winder*

TITLE

TECH. MANAGER - ASSET ADMIN.

DATE

5/05/93

TYPE OR PRINT NAME

J. L. MORRIS

(713) 544-3797

TELEPHONE NO.

(This space for State Use)

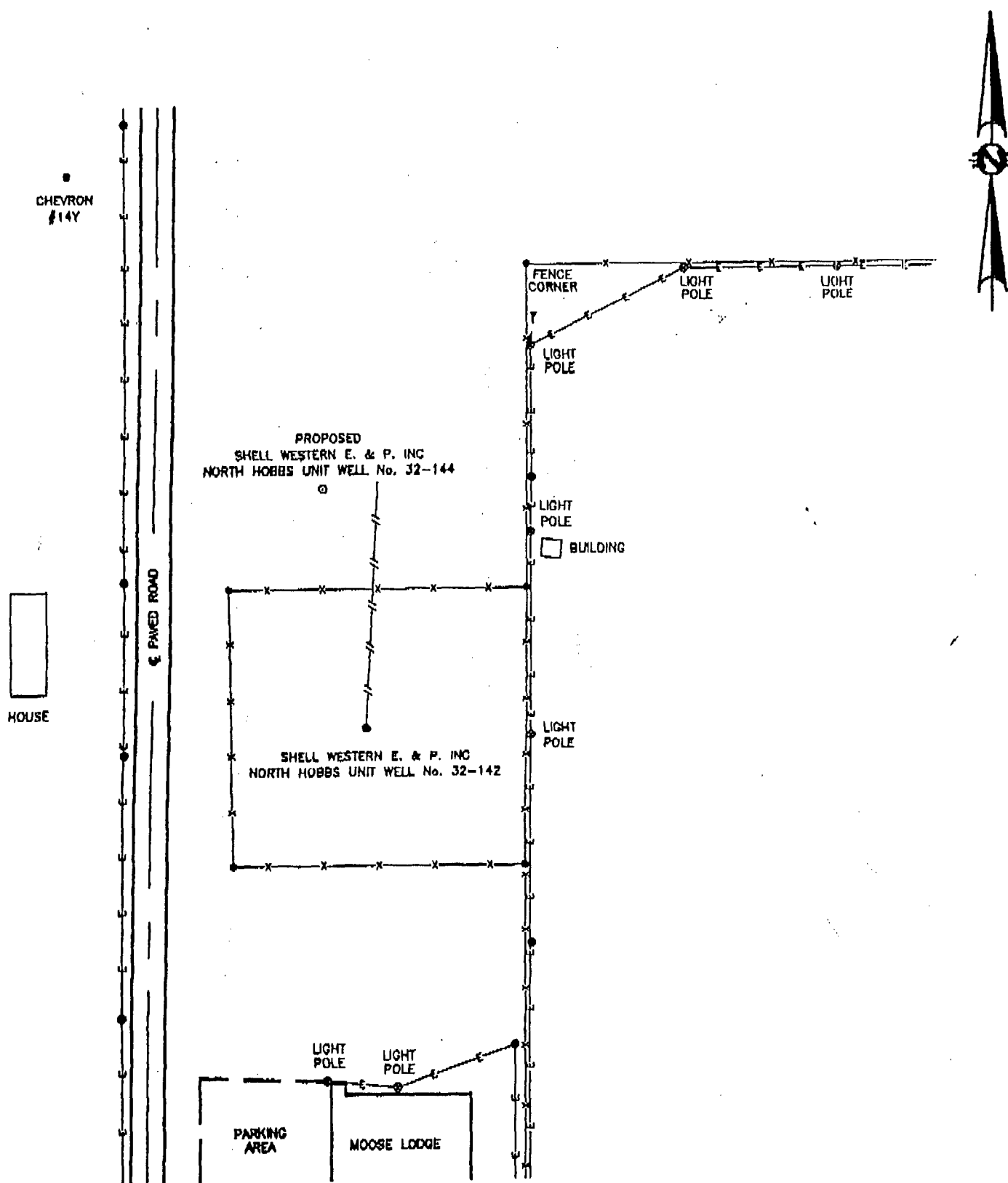
APPROVED BY

TITLE

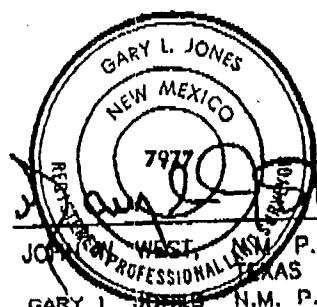
DATE

CONDITIONS OF APPROVAL, IF ANY:

SW/4 SECTION 32, TOWNSHIP 18 SOUTH, RANGE 36 EAST, N.M.P.M.  
LEA COUNTY, NEW MEXICO



I HEREBY CERTIFY THAT THIS PLAT WAS PREPARED FROM FIELD NOTES OF AN ACTUAL SURVEY AND MEETS OR EXCEEDS ALL REQUIREMENTS FOR LAND SURVEYS AS SPECIFIED BY THIS STATE.



JOHN W. WEST, P.E. & P.S. No. 676  
GARY L. JONES, N.M. P.S. No. 1138  
GARY G. EIDSON TEXAS P.L.S. No. 7977  
GARY G. EIDSON TEXAS P.L.S. No. 4735

## SHELL WESTERN E. & P. INC.

TOPOGRAPHIC STUDY OF THE AREA AROUND  
PROPOSED NORTH HOBBS UNIT WELL 32-144,  
LOCATED 1175' FWL & 786' FSL, SECTION 32,  
T-18-S, R-38-E, N.M.P.M.,  
LEA COUNTY, NEW MEXICO

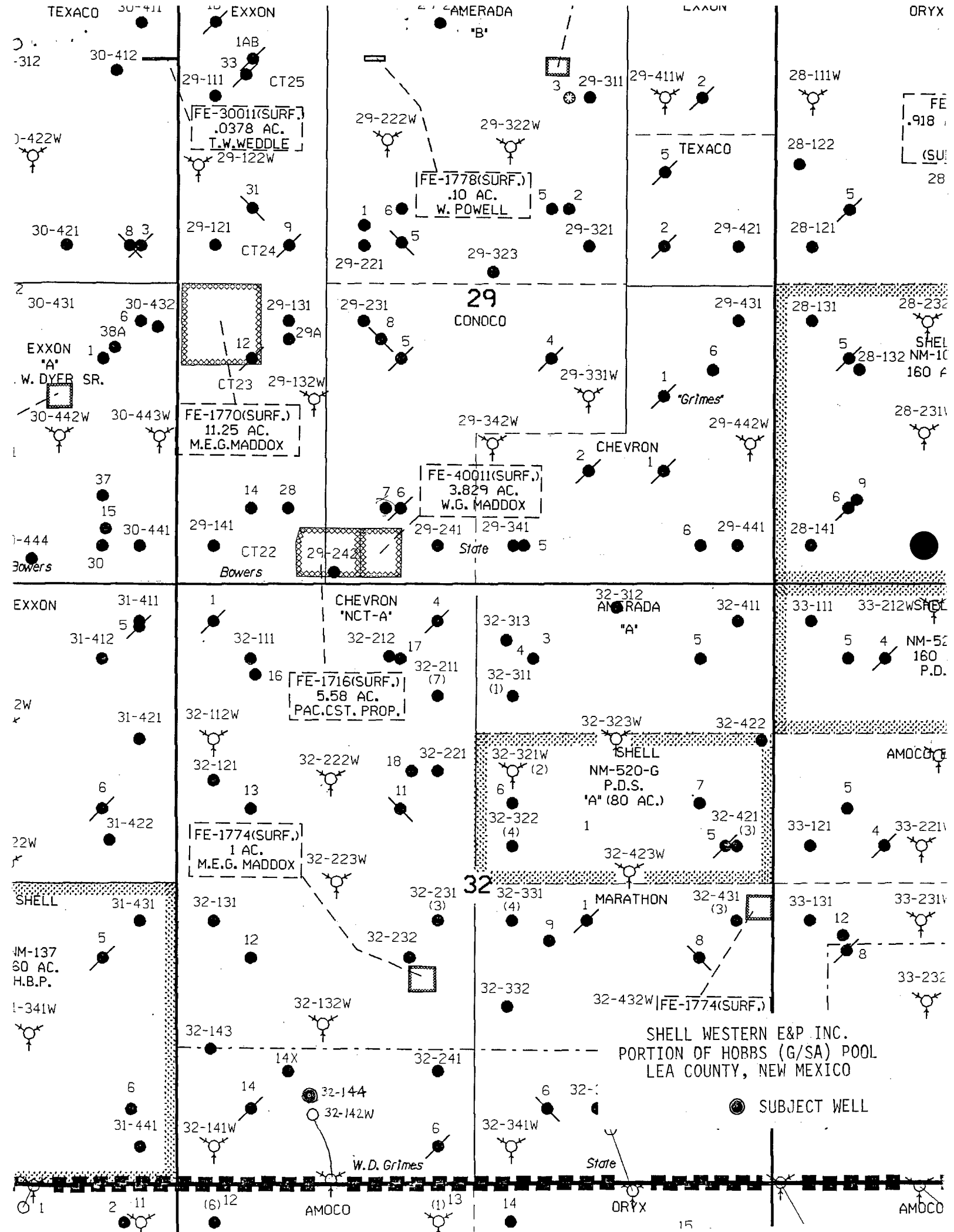
JOHN W. WEST ENGINEERING COMPANY  
CONSULTING ENGINEERS & SURVEYORS - HOBBS, NEW MEXICO

Survey Date: 10-22-1992	Drawn By: S. STANFIELD
Approved By:	Sheet 1 of 1 Sheets
Project Number: 92-11-1601	File Name: SHE1601B
Date: 10-23-1992	Disk: SS#19 Scale: 1"=100'

## SERVICE LIST

### Offset Operator

Amoco Production Company  
P. O. Box 68  
Hobbs, NM 88240



PS Form 3811, July 1983 447-845

**SENDER: Complete items 1, 2, 3 and 4.**

Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.

1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

**3. Article Addressed to:**

AMOCO PRODUCTION CO.  
P. O. BOX 68  
HOBBS, NM 88240

**4. Type of Service:**

- |   |                                  |
|---|----------------------------------|
| <input type="checkbox"/> Registered           | <input type="checkbox"/> Insured |
| <input checked="" type="checkbox"/> Certified | <input type="checkbox"/> COD     |
| <input type="checkbox"/> Express Mail         |                                  |

**Article Number**

P 247 193 925

Always obtain signature of addressee or agent and **DATE DELIVERED.**

**5. Signature - Addressee**

X

**6. Signature - Agent**

X

**7. Date of Delivery**

**8. Addressee's Address (ONLY if requested and fee paid)**

DOMESTIC RETURN RECEIPT