

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-75

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

5a. Indicate Type of Lease  
State  Fee

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 A WELL TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

CIL WELL  CAR WELL  OTHER- INJECTOR

Name of Operator  
SHELL WESTERN E&P INC.

Address of Operator  
P. O. BOX 576, HOUSTON, TEXAS 77001 (WCK 4435)

Location of Well  
UNIT LETTER B 1309 FEET FROM THE NORTH LINE AND 2310 FEET FROM  
THE EAST LINE, SECTION 19 TOWNSHIP 18-S RANGE 38-E N.M.P.M.

7. Unit Agreement Name  
N. HOBBS (G/SA) UNIT

8. Form or Lease Name  
SECTION 19

9. Well No.  
311

10. Field and Pool, or Widened  
HOBBS (G/SA)

11. Elevation (Show whether DF, RT, GR, etc.)  
3667' GL

12. County  
LEA

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
FULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>Perf'd &amp; Acid</u> <input checked="" type="checkbox"/>

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.

6-06 to 6-08-88:  
POH w/prod equip. CO to TD (4296'). Perf'd San Andres 4211' - 65'  
(2 JSPPF). Acid perfs 4210' - 73' w/ 1200 gals 15% HCl + 600#  
rock salt. Installed inj equip, setting Guiberson Uni-PKR VI @ 4107'.  
Pres tstd csg to 800# for 30 min, held OK. Ret'd well to inj.

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

ISSUED A. J. FORE TITLE SUPERVISOR REG. & PERMITTING DATE 7-25-88

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

JUL 29 '88