

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.

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.



7. Lease Name or Unit Agreement Name
N. HOBBS (G/SA) UNIT
SECTION 24

8. Well No.
321

9. Pool name or Wildcat
HOBBS (G/SA)

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 (WCK 4435)

4. Well Location
Unit Letter G : 2310 Feet From The NORTH Line and 2310 Feet From The EAST Line
Section 24 Township 18S Range 37E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3671 DF

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:
SUBSEQUENT REPORT OF:
REMEDIAL WORK ALTERING CASING
COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
CASING TEST AND CEMENT JOB
OTHER: PB FOR WSO & ACD

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.

8-23 TO 8-28-90:
POH W/PROD EQUIP. CO TO 4276' (TAGGED BTM). PB OH W/12-1/2 SX 12/20 SD. TAG SD @ 4234'. DMPD 8 SX CMT. TAG TOC @ 4180' (WL). RIH W/BAILER. TAG CMT @ 4182', HIT ANOTHER STRINGER @ 4195' & SOLID CMT @ 4204'. POH W/BAILER. ACD G/SA OH 3994' - 4204' W/5000 GALS 15% NEFE HCL + 2000# ROCK SALT. INST PROD EQUIP & RETD TO PROD.

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 4/30/91

TYPE OR PRINT NAME J. H. SMITHERMAN TELEPHONE NO. 713/870-3797

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE MAY 07 1991

CONDITIONS OF APPROVAL, IF ANY: