

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-75

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

Oil Well Gas Well OTHER- **INJECTOR**

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

Name of Operator
SHELL WESTERN E&P INC.

8. Face or Lease Name
SECTION 25

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

9. Well No.
121

Location of Well
UNIT LETTER **E** **1650** FEET FROM THE **NORTH** LINE AND **990** FEET FROM

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

THE **WEST** LINE, SECTION **25** TOWNSHIP **18S** RANGE **37E** NMPM.

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

12. County
LEA

6. 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 OPER. <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"/>	ACID DUMP <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.

4-08-86: Dmptd 2000 gals 15% HCl-NEA dwn tbg. Returned 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 6-16-88

Checked by
Paul Deutz
Geologist

APPROVED BY _____ TITLE _____ DATE _____