

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

OIL CONSERVATION DIVISION

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

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 32-025-07543
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. 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. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Lease Name or Unit Agreement Name N. HOBBS (G/SA) UNIT SECTION 33
2. Name of Operator Shell Western E&P Inc.	8. Well No. 141
3. Address of Operator P.O. Box 576 Houston, TX 77001-0576 (WEEK 4465)	9. Pool name or Wildcat HOBBS (G/SA)
4. Well Location Unit Letter <u>M</u> : <u>660</u> Feet From The <u>SOUTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line Section <u>33</u> Township <u>18S</u> Range <u>38E</u> NMPM LEA County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3535' GR

11. 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"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: <u>ACD</u> <input checked="" type="checkbox"/>	

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.

4-28 TO 5-03-93:

POH W/PROD EQMT. ACD SA PERFS 4062' - 4249' W/4000 GAL 15% HCL W/AS-66. INST PROD EQMT & RTP.

DAILY PROD PRIOR TO OPNS: 88 BO + 1846 BW + 56 MCF

DAILY PROD AFTER OPNS: 105 BO + 1929 BW + 14 MCF

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

SIGNATURE J. L. Morris TITLE TECH. MANAGER - ASSET ADMIN. DATE 6/25/93

TYPE OR PRINT NAME J. L. MORRIS TELEPHONE NO. 713/544-3797

(This space for State Use)

Orig. Signed by  
Paul Kautz  
Geologist

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JUN 30 1993

CONDITIONS OF APPROVAL, IF ANY: