Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office					
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088			WELL API NO.		
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE X FEE 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name N. HOBBS (G/SA) UNIT		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410					
SUNDRY NOTIC (DO NOT USE THIS FORM FOR PROP DIFFERENT RESERV (FORM C-10					
1. Type of Well: OIL GAS WELL X WELL	OTHER		SECTION 2	3	
2. Name of Operator SHELL WESTERN E&P INC	8. Well No. 421				
3. Address of Operator P. O. BOX 576, HOUSTO	9. Pool name or Wildcat HOBBS (G/SA)				
4. Well Location	Feet From The NORTH	Line and 330	Feet From Ti	ne EAST	Line
Section 23	100	Range 37E er DF, RKB, RT, GR, etc.)	NMPM LEA		County
11. Check Ap	ppropriate Box to Indicate NTION TO:		eport, or Other D SEQUENT RE	*	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		TERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PL	LUG AND ABANDO	ONMENT [
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB		
OTHER:		OTHER: ACD	TREATMENT .		<u> </u>
12. Describe Proposed or Completed Operation work) SEE RULE 1103.	as (Clearly state all pertinent details,	and give pertinent dates, includ	ling estimated date of sk	arting any proposed	
2-22-88					
PUMPED 250 GAL XYLENE DOW	IN CSG. CIRC'D 24 HO	URS. RETD TO PRO	o.		
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I hereby certify that the information above is true an		•		MAY	
SIGNATURE Afficiation	man	PROD. ADMIN.	ADVISOR	DATE MAY	0 8 198
TYPE OR PRINT NAME J. H. SMITH	ERMAN	(71	3) 870-3797	TELEPHONE NO.	
(This space for State Use) ORIGINAL SIGN DISTRICT	ED BY JERRY SEXTON			MAY 1	5 1989
APPROVED BY		TITLE		_ DATE	

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