

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

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

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- INJECTOR	7. Unit Agreement Name N. HOBBS (G/SA) UNIT
2. Name of Operator SHELL OIL COMPANY	8. Farm or Lease Name SECTION 23
3. Address of Operator P. O. BOX 991, HOUSTON, TEXAS 77001	9. Well No. 431
4. Location of Well UNIT LETTER I, 2310 FEET FROM THE SOUTH LINE AND 330 FEET FROM THE EAST LINE, SECTION 23, TOWNSHIP 18-S, RANGE 37-E, NMPM.	10. Field and Pool, or Wildcat HOBBS (G/SA)
15. Elevation (Show whether DF, RT, GR, etc.) 3681' DF	12. County LEA

16. 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"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
		OTHER CONVERTED TO UPPER BASAL GRAYBURG INJ. <input checked="" type="checkbox"/> PMX - 89	

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.

9-17-82: Cleaned out to 4157'.
9-18-82: Acidized open hole w/7,000 gals 15% HCl NEA.
9-21-82: Set 5-1/2" Guiberson Uni-Pkr VI @ 3913' w/10,000# tension. Well complete for injection.

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

Signed A. J. FORE TITLE SUPERVISOR REG. & PERMITTING DATE OCTOBER 14, 1982

ORIGINAL SIGNED BY

APPROVED BY JERRY SEXTON TITLE _____ DATE OCT 19 1982

CONDITIONS OF APPROVAL, IF ANY, LIST HERE