Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form	C-103	
Revis	d 1-1-8	9

DISTRICTI	OIL CONSERVATION	1 DIVISION	WELL API NO.
P.O. Box 1980, Hobbs, NM 88240	P.O. Box 2088 Santa Fe, New Mexico 8	7504-2088	The distance of the second sec
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Sania Fe, New Mexico	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5. Indicate Type of Lease STATE XX FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.
CUNDRY NOT	ICES AND REPORTS ON WELL	S	
1	OPOSALS TO DRILL OR TO DEEPEN OR RVOIR. USE "APPLICATION FOR PERI	5111 A	7. Lease Name or Unit Agreement Name
	2-101) FOR SUCH PROPOSALS.)		N. HOBBS (G/SA) UNIT
1. Type of Well:			SECTION 24
WEIL XX	OTHER		8. Well No.
2. Name of Operator SHELL WESTERN E&P I	NC		431
3 Address of Operator		١٥٤١	9. Pool name or Wildcat HOBBS (G/SA)
P 0 BOX 576, HOUS	TON, TX 77001 (WCK 44	35)	HUBBS (G/SA)
4. Well Location 2 3	90 Feet From The SOUTH	Line and330	Feet From The <u>EAST</u> Line
24	Township 18S Ran		NMPM LEA County
Section	10. Elevation (Show whether D 3670 DF		· ////////////////////////////////////
Check	Appropriate Box to Indicate N	Vature of Notice, R	eport, or Other Data
NOTICE OF IN	TENTION TO:	SUB	SEQUENT REPORT OF:
٠٢١	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
PERFORM REMEDIAL WORK	CHANGE PLANS	COMMENCE DRILLING	G OPNS. PLUG AND ABANDONMENT
TEMPORARILY ABANDON	OFMICE PARTS	CASING TEST AND C	<u></u>
PULL OR ALTER CASING		Δι	CD TREATMENT X
OTHER:		OTHER.	
 Describe Proposed or Completed Operary) SEE RULE 1103. 	rations (Clearly state all pertinent details, an	id give pertinent dates, incli	uding estimated date of starting any proposed
WORK CES NO.			
2-24-88		•	
PUMPED 1000 GAL 15% NEF 2 HOURS. RETD TO PRODUC	E ACID DOWN CSG. FLUSHED	D WITH 100 BBLS	S FRESH WATER. SHUT IN FOR
I hereby certify that the information above in	true and complete to the best of my knowledge an	d belief.	MAY 0 9 1989
SIGNATURE	nitheme 17	PROD. ADMIN	1. AUVISOR DATE
<i>V</i>	1I THERMAN	(713) 870-3797 телерноме но.
			MAY 1 2 1989
(This space for State Use) ORIGINAL SIGNA DISTRICT	I SUPERVISOR	MIR	
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	A .	me ———	