

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

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

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

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

WELL API NO.

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name  
N. HOBBS (G/SA) UNIT  
SECTION 25

8. Well No.

321

9. Pool name or Wildcat

HOBBS (G/SA)

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 ☒ GAS WELL ☐ OTHER

2. Name of Operator  
Shell Western E&P Inc.

3. Address of Operator  
P.O. Box 576 Houston, TX 77001-0576 (WCK 4435)

4. Well Location  
Unit Letter G : 1980 Feet From The NORTH Line and 1980 Feet From The EAST Line

Section 25

Township 18S

Range 37E

NMPM

LEA

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3670' DF

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: OAP & ACD ☒

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.

5-22 TO 6-05-90:

POH W/PROD EQUIP. TAG FILL @ 4090'. CO TO 4098'. DO CICR/CMT TO 4104'. CO TO 4113'. PERF'D SA 4102-05' (2 JSPF). TAG BTM @ 4109'. ACD PERFS 4102-05' W/ 1200 GALS 15% NEFE HCL. SET RBP @ 4098'. ACD GRAYBURG PERFS 3961' - 4085' W/4000 GALS 15% HCL NEFE + 900# ROCK SALT. REL RBP & POH. INST PROD EQUIP & RETD TO PROD.

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

SIGNATURE

*J. H. Smitherman*

TITLE REGULATORY SUPV.

DATE 3/25/91

TYPE OR PRINT NAME

J. H. SMITHERMAN

TELEPHONE NO. 713/870-3797

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APR 02 1991