Submit 3 Copies

State of New Mexico , Minerals and Natural Resources Department Er

Form	C	-10:	3
Revis	ed	1-1	-8

Form C-10	\mathfrak{z}
Revised 1.	1-89

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT II P.O. Drawer DD, Artesia, NM 88210	WELL API NO. 5. Indicate Type of Lease STATE X FEE 6. State Oil & Gas Lease No.				
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410					
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.)	7. Lease Name or Unit Agreement Name N. HOBBS (G/SA) UNIT				
1. Type of Well: OIL GAS WELL X OTHER	SECTION 25				
2. Name of Operator	8. Well No. 321				
SHELL WESTERN E&P INC.	9. Pool name or Wildcat				
3 Address of Operator	HOBBS (G/SA)				
P. O. BOX 576, HOUSTON, TX 77001 (WCK 4435)	110000 101				
4. Well Location	980 Feet From The <u>EAST</u> Line				
Unit Letter G: 1980 Feet From The NURTH Line and					
Township 18S Range 37E	NMPM LEA County				
Section 25 Township 185 Range 37 E. Section 25 Township 185 Range 37 E. 10 Elevation (Show whether DF, RKB, RT, GR, etc.)	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>				
26701 DE	V/////////////////////////////////////				
William I Americate Box to Indicate Nature of Notice, R	Leport, or Other Data				
11. SUE	SEQUENT REPORT OF:				
NOTICE OF INTENTION TO:					
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING				
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLIN	G OPNS. PLUG AND ABANDONMENT				
CASING TEST AND C	EMENT JOB				
PULL OR ALTER CASING	xyl trtd x				
OTHER: OTHER:					
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, incl	luding estimated date of starting any proposed				
12. Describe Proposed or Completed Operations (Clearly state an personal work) SEE RULE 1103.					
3-15-88:	etd to prod.				
3-15-88: Pmpd 250 gals Xyl dwn annulus. Circ'd Z4 hrs & retd to prod.					

I hereby certify that the information above is true and complete to the best of my knowledge and belief	≠. PROD. ADMIN. ADVISOR	DATE 4-26-89
	(713) 870-3797	TELEPHONE NO.
TYPEOR PRINT NAME J. H. SMITHERMAN		MAY " 1 1989

Eddie W. Seay Oil & Gas Inspector

1 1989 MAY

CONDITIONS OF AFFROVAL, IF ANY: