STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

46. 67 COPICS SCCEIVES		
DISTRIBUTION	T	
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR	\top	I

CONDITIONS OF APPRODUCE RELATIVEDER

OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103 - Revised 10-1-78

FILE			
U.S.G.S.	5a. Indicate Type of Lease		
LAND OFFICE	State X Fee		
OPERATOR	5. State Oil & Gas Lease No.		
SUNDRY NOTICES AND REPORTS ON WELLS			
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO ORICL ON TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)			
1.	7. Unit Agreement Name		
OIL XX GAS OTHER-	N HODDS (C/CA) HNIT		
2. Name of Operator	N. HOBBS (G/SA) UNIT		
SHELL OIL COMPANY	i i		
3. Address of Operator	SECTION 36		
P. O. BOX 991, HOUSTON, TEXAS 77001	10, Field and Pool, or Wildcat		
UNIT LETTER G 1650 FEET FROM THE NORTH LINE AND 1650 FEET FR	₀ HOBBS (G/SA)		
FICT			
THE EAST LINE, SECTION 36 TOWNSHIP 18-S RANGE 37-E NMP	(
15. Elevation (Show whether DF, RT, GR, etc.)	12. County		
3663' DF	LEA ())))))		
Check Appropriate Box To Indicate Nature of Notice, Report or C	Other Data		
	NT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING		
TEMPORARILY ABANDON COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT		
PULL OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOB	TEGG AND ASAMBONMENT		
OTHER	· —		
CONVERT TO UPPER GRAYBURG INJECTOR XX			
PMX-89			
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, includi	ng estimated date of starting any proposed		
work) SEE RULE 1103.	•		
1. CO to PBTD (4280'). Run CNL/GR/CCL from 4280' to 2280'.			
:			
2. Set RBP @4125' +. Pressure test csg to 500 psi.			
3. Run CBL from 4125' to surface. PB w/Class C neat cmt (to be determined).			
in the state of th			
4. Perforate 5 1/2" csg at depths to be determined from logs.			
-			
5. Acidize perforations w/15% HCl NEA acid at (concentrations to be determined).			
,	accommunica,.		
Set packer. Take injectivity test and complete.			
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
A /			
regional delice Curtison A. J. FORE TITLE SUPERVISOR REG. & PERMITTIN	IG DATE MARCH 30, 1982		
CONTR BY			
ORIGINAL SIGNED. BY	APR 2 1002		
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APR 1 1982

C.C.A. HOBBS OFFICE