## 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

.

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088 WELL API NO.

30-025-07337

5. Indicate Type of Lease

STATE FEE X

P.O. Drawer DD, Artesia, NM 88210	STATE FEE	
DISTRICT III 1000 Rio Brzzoe Rd., Aztec, NM 87410	6. State Oil & Gas Lease No.	
CONTROL IND DEPORTS ON WELLS		
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	
1. Type of Well: OIL GAS WELL X WELL OTHER	N. HOBBS (G/SA) UNIT SECTION 18	
2. Name of Operator	8. Well No.	
SHELL WESTERN E&P INC.	141	
3 Address of Operator	9. Pool name or Wildcat	
P. O. BOX 576, HOUSTON, TX 77001 (WCK 4435)	HOBBS (G/SA)	
1 1 1 1 1 7	NECT.	
Unit Letter M: 330 Feet From The SOUTH Line and 330 Feet From The WEST Line		
	NMPM LEA County	
3673 DF		
Check Appropriate Box to Indicate Nature of Notice, R	eport, or Other Data	
NOTICE OF INTENTION TO:	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING	G OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING CASING TEST AND CI		
Отнен:		
2 110 miles (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed		

- 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.
- 1. POH w/prod equip.

CONDITIONS OF APPROVAL, IF ANY:

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- 2. CO to 4151'. (TOL @ 4086'.)
- 3. Perf San Andres 4087'-90' (2 JSPF).
- 4. Acdz perfs 4087'-90' w/400 gals 15% HCl.
- 5. Install prod equip & ret well to prod.

ample to the best of my knowle	edice and belief.	
I hereby certify that the information above is true and complete to the best of my knowled SKINATURE Affirmation above is true and complete to the best of my knowledge and support the state of the best of my knowledge and support to the best of my knowledge and complete to the best	THE REGULATORY SUPV.	6-16-89
TYPE OR PRINT NAME . J. H. SMITHERMAN	(713) 870-3797	TELEPHONE NO.
(This space for State Use)  ORIGINAL SIGNED BY JERRY SEXTON  DISTRICT   SUPERVISOR		JUN 1 9 1989
APPROVED BY	31MT	DATE