

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State ☐ Fee ☒

5. State Oil & Gas Lease No.

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name N. HOBBS (G/SA) UNIT
2. Name of Operator SHELL OIL COMPANY	8. Farm or Lease Name SECTION 19
3. Address of Operator P. O. BOX 991, HOUSTON, TX 77001	9. Well No. 211
4. Location of Well UNIT LETTER C, 1309 FEET FROM THE NORTH LINE AND 2310 FEET FROM THE WEST LINE, SECTION 19 TOWNSHIP 18-S RANGE 38-E N.M.P.M.	10. Field and Pool, or Wildcat HOBBS (G/SA)
15. Elevation (Show whether DF, RT, GR, etc.) 3663' DF	12. County LEA

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER OPEN ADDITIONAL PAY AND ACIDIZE <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. 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.

- Clean out to PBTD (4263'). Spot 250 gals 15% HCl.
- Perforate the San Andres zones II and IIIU from the top down 4150 to 54', 4186 to 92' and 4226' to 34' (total 21', 42 holes).
- Acidize perfs w/3500 gals 15% HCl-NEA.
- Install production equipment and return well to production.

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

SIGNED [Signature] A. J. FORE TITLE SUPERVISOR REG. & PERMITTING DATE MARCH 8, 1983

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR TITLE DATE MAR 14 1983

CONDITIONS OF APPROVAL, IF ANY: