Submit 3 Copies to Appropriate

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

District Office	VISION
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 P.O. Box 2088	2088
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-	5. Indicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No.
PEROPEC ON WELLS	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLU (DO NOT USE THIS FORM FOR PERMIT	G BACK TO A 7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PHOPOSALS TO BHILL OF THE DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	N. HOBBS(G/SA) UNIT
1. Type of Well: OIL OAS WELL X OTHER	SECTION 19
2. Name of Operator	241
SHELL WESTERN E&P INC.	9. Pool name or Wildcat
3. Address of Operator D. O. POV 576 HOUSTON, TX 77001 (WCK 4435).	HOBBS (G/SA)
P. U. BUX 370, 11003 (01)3	2310 WEST Line
	Line and red from the
100	.38E NMPM LEA County
Section 19 Township Industry 19 Flevation (Show whether DF, RKE	
/////// 3661' DF	(//////////////////////////////////////
Check Appropriate Box to Indicate Nature	of Notice, Report, or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
	EDIAL WORK ALTERING CASING
PERFORM REMEDIAL WORK	MENCE DRILLING OPNS. PLUG AND ABANDONMENT
TEMPOHARILY ABANDON	WILITOE BIRELITO STATE
PULL OH ALTEH CASING	NG TEST AND CEMENT JOB L.J
OTHER:	ER: UAP; AT
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give p work) SEE RULE 1103.	pertinent dates, including estimated date of starting any proposed
4-10-89 TO 4-12-89	. DEDEED
POH WITH PROD EQUIP. RIH WITH RBP & SET @ 4140 SAN ANDRES(4128-4135') WITH 2 JSPF. POH WITH RACD PERFS(4128-4232') WITH 2000 GAL 15% HCL. FPKR. RIH WITH PROD EQUIP. RETD TO PROD.	RI'. SPOTTED 100 GAL 15% HCL. PERFED RBP. RIH WITH PKR & SET @ 4100'. FLUSHED WITH 35 BBLS WATER. POH WITH
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	5-17-89
SIGNATURE A STRUCTURE TITLE	PROD. ADMIN. ADVISOR DATE 5-17-89
<i>/ ' '</i> ,	(713) 870-3797 TELEPHONE NO.
(This space for State Use RIGINAL SIGNED BY JERRY SEXTON	MAY 2 2 1989
DISTRICT I SUPERVISOR TITLE —	DATE