Submit 3 Copies

State of New Mexico

Form C-103

		desources Department	Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980	OIL CONSERVATIO		WELL API NO.
DISTRICT II	P.O. Box 200 Santa Fe, New Mexico		
P.O. Drawer DD, Artesia, NM 88210	· · · · · · · · · · · · · · · · · · ·	2.00. 2000	5. Indicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Loase No.
SUNDRY NO	TICES AND REPORTS ON WEL	LS	
DIFFERENT RESE	IOPOSALS TO DRILL OR TO DEEPEN (ERVOIR. USE "APPLICATION FOR PER C-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A MIT"	7. Lease Name or Unit Agreement Name N. HOBBS (G/SA) UNIT
1. Type of Well: OIL GAS WELL WELL] OTHER I	NJECTOR	n. noods (d/SA) unii
2. Name of Operator			8. Well No.
Shell Western E&P, In	ic.		241
	(5237), HOUSTON, TX 77	001-0576	9. Pool name or Wildcat HOBBS (G/SA)
4. Well Location Unit Letter N : 33	O Feet From The SOUTH	1 1	325 Feet From The WEST Line
Oint Louis	rect Floir The 30011	Line and 1	325 Feet From The WEST Line
Section 27	Township 18S Ra	nge 38E	NMPM LEA County
	10. Elevation (Show whether		c.)
11. Check A	aproprieto Poy to Indicate	3643' GR	Power A see Old Power A
	ppropriate Box to Indicate I		
NOTICE OF II	NIENTION TO:	208	SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
EMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
	Change Plans	CASING TEST AND CE	
PULL OR ALTER CASING			MENT JOB
DTHER: 12. Describe Proposed or Completed Opwork) SEE RULE 1103.		CASING TEST AND CE	MENT JOB
PULL OR ALTER CASING DTHER: 12. Describe Proposed or Completed Op		CASING TEST AND CE	MENT JOB ACD
OTHER: 12. Describe Proposed or Completed Opwork) SEE RULE 1103. 5-17-94:	erations (Clearly state all pertinent deta	CASING TEST AND CE	MENT JOB ACD
PULL OR ALTER CASING DTHER: 12. Describe Proposed or Completed Opwork) SEE RULE 1103. 5-17-94: ACD G/SA OH 4060' -	erations (Clearly state all pertinent deta	CASING TEST AND CE	ACD
DTHER: 12. Describe Proposed or Completed Opwork) SEE RULE 1103. 5-17-94: ACD G/SA OH 4060'-SALT. RTI.	erations (Clearly state all pertinent deta	CASING TEST AND CE OTHER: Lils, and give pertinent date ENTOL "200" ACID"	ACD
DTHER: 12. Describe Proposed or Completed Opwork) SEE RULE 1103. 5-17-94: ACD G/SA OH 4060'-SALT. RTI.	erations (Clearly state all pertinent deta	CASING TEST AND CE OTHER: Lils, and give pertinent date ENTOL "200" ACID"	ACD
ULL OR ALTER CASING THER: 12. Describe Proposed or Completed Opwork) SEE RULE 1103. 5-17-94: ACD G/SA OH 4060'-SALT. RTI.	4345' W/2500 GAL 15% HCL PE	CASING TEST AND CE OTHER: Lils, and give pertinent date ENTOL "200" ACID"	ACD ACD Tes, including estimated date of starting any proposed + 5000 GAL 20% HCL + 3000# ROCK
PULL OR ALTER CASING DTHER: 12. Describe Proposed or Completed Opwork) SEE RULE 1103. 5-17-94: ACD G/SA OH 4060'-SALT. RTI.	true and complete to the best of my knowledge	CASING TEST AND CE OTHER: Lils, and give pertinent date ENTOL "200" ACID" and belief.	ACD ACD Tes, including estimated date of starting any proposed + 5000 GAL 20% HCL + 3000# ROCK DMIN. DATE6/27/95
PULL OR ALTER CASING DTHER: 12. Describe Proposed or Completed Opwork) SEE RULE 1103. 5-17-94: ACD G/SA OH 4060'-SALT. RTI.	true and complete to the best of my knowledge	CASING TEST AND CE OTHER: Lils, and give pertinent date ENTOL "200" ACID" and belief.	ACD ACD Tes, including estimated date of starting any proposed + 5000 GAL 20% HCL + 3000# ROCK
DTHER: 12. Describe Proposed or Completed Opwork) SEE RULE 1103. 5-17-94: ACD G/SA OH 4060'-SALT. RTI. Thereby certify that the information above is signature TYPE OR PRINT NAME G. S. NA	4345' W/2500 GAL 15% HCL PE	CASING TEST AND CE OTHER: Lils, and give pertinent date ENTOL "200" ACID" and belief.	ACD

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