Submit 3 Copies to Appropriate District Office

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.

5. Indicate Type of Lease STATE ☐ FEE ☒

6. 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.)

7. Lease Name or Unit Agreement Name: N. HOBBS (G/SA) UNIT SECTION 28

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER INJECTOR

2. Name of Operator: SHELL WESTERN E&P INC.

8. Well No. 111

3. Address of Operator: P. O. BOX 576, HOUSTON, TX 77001 (WCK 4435)

9. Pool name or Wildcat: HOBBS (G/SA)

4. Well Location
Unit Letter D : 990 Feet From The NORTH Line and 330 Feet From The WEST Line
Section 28 Township 18S Range 38E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3646' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: Profile modification ☒		OTHER: ☐	

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/inj equip.
2. CO to 4288' (TD).
3. PB w/ 20/40 sd to 4268'. PB w/100 mesh sd from 4268' to 4263'. Cap sd w/ hydromite to 4254'.
4. Set CIBP @ ±4200' & pkr @ ±4130'. Estab inj rt into sqzd SA perfs 4147'-82'. If inj rt is not sufficient, brk dwn sqz perfs w/500 gals 15% HCl. Estab inj rt, POH.
5. Set CICR @ 4025'.
6. Sqz perfs 4147'-82' w/100 sx Cls "C" cmt + 200 SCF N_2/bbl + 2% $CaCl_2$ + 1.5% HOWCO Suds + 0.75% HC-2 followed by 50 sx Cls "C" cmt + 2% $CaCl_2$. Cap CICR w/5' cmt. WOC 24 hrs.
7. DO CICR & cmt to CIBP @ 4200'. Pres tst sqz to 500#.

(CONT'D ON REVERSE SIDE)

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

SIGNATURE J. H. Smitherman TITLE REGULATORY SUPV. DATE 12-19-89

TYPE OR PRINT NAME J. H. SMITHERMAN (713) 870-3797 TELEPHONE NO.

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE DATE DEC 26 1989

DEC 26 1989

CONDITIONS OF APPROVAL, IF ANY:

8. CO to new PBTD (4254').
9. Acdz perfs 4214'-26' & OH 4244'-73' w/2000 gals 15% HCl + 800# rock salt.
10. Install inj equip, setting Guib Uni-PKr VI @ ± 4200'. Pres tst csg to 300# for 30 min. Ret well to inj.