

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-75

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

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.)

CIL WELL ☐ GAS WELL ☐ OTHER- INJECTOR

7. Unit Agreement Name
N. HOBBS (G/SA) UNIT

Name of Operator
SHELL WESTERN E&P INC.

8. Form or Lease Name
SECTION 28

Address of Operator
P. O. BOX 576, HOUSTON, TEXAS 77001 (WCK 4435)

9. Well No.
111

Location of Well
UNIT LETTER D, 990 FEET FROM THE NORTH LINE AND 330 FEET FROM THE WEST LINE, SECTION 28 TOWNSHIP 18-S RANGE 38-E N.M.P.M.

10. Field and Pool, or Wholeness
HOBBS (G/SA)

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

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 ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPERATIONS ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	
		OTHER SQZD, PERF'D SAN ANDRES & ACD ☒	

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.

11-09-87: POH w/inj equip.
11-11 to 11-12-87: DO CICR @ 4130' & cmt to 4185'. Prev sqzd perfs 4147'-82' leaking.
11-13 to 11-14-87: Set CICR @ 3950'. Sqzd perfs 4041' - 4182' w/125 sx Cls "C" cmt + 2% CaCl₂.
11-16 to 11-18-87: Tagged TOC @ 3947'. Drld thru CICR @ 3950' + cmt to 4185'. Pres tstd sqzd perfs 4041' - 4182' to 500#, held OK. DO cmt to 4288' (tbq tally) -- original TD @ 4280'. Circ'd clean. Tagged restriction @ 4248' & pushed to btm.
11-19 to 11-20-87: Perf'd San Andres 4214'-73' (2 JSPF). Acd perfs 4214'-73' w/4160 gals 15% HCl. Installed inj equip, setting Guiberson Uni-Pkr VI @ 3968'. Pres tstd csg to 500#, held OK 15 min. Returned well to inj.

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

J. Marcus Winder A. J. FORE TITLE SUPERVISOR REG. & PERMITTING DATE 4-15-88
ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR
PROVED BY _____ TITLE _____ DATE 4-15-88

RECEIVED
APR 18 1988
OCCO
HOBBS OFFICE