| Submit 3 Copies to Appropriate | State of New Me Energy, Minerals and Natural Re | | | Form C-103 | |
|---|--|--------------------------------|--|-----------------|--|
| District Office | | - | | Revised 1-1-89 | |
| DISTRICT I P.O. Box 1980, Hobbs, NM 88240 | OIL CONSERVATION | | WELL API NO. | | |
| DISTRICT II | P.O. Box 208 Santa Fe, New Mexico | | 30-025-07429 | | |
| P.O. Drawer DD, Artesia, NM 88210 | | 5750 · 2 000 | 5. Indicate Type of Lease | TATE FEE X | |
| DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 | | | 6. State Oil & Gas Lease | | |
| 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. Type of Well: OIL WELL OTHER INJECTOR | | | 7. Lease Name or Unit Agreement Name N. HOBBS (G/SA) UNIT SECTION 28 | | |
| 2. Name of Operator | | | 8. Well No. | | |
| Shell Western E&P Inc. | | | 221 | • | |
| 3. Address of Operator P.O. Box 576 Houston, TX 77001-0576 | | | 9. Pool name or Wildcat | | |
| 4. Well Location | 77001-0576 | | HOBBS (G/SA) | | |
| Unit Letter _ F _ : _ 19 ' Section _ 28 | Township 18S Ra 10. Elevation (Show whether | Line and | 1650 Feet From The _ | WEST Line | |
| | ////// 3646' GR | | | | |
| 11. Check A | Appropriate Box to Indicate 1 | Nature of Notice, Re | eport, or Other Data | | |
| NOTICE OF INT | ENTION TO: | | SEQUENT REPO | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK | ALTER | RING CASING | |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRILLING | 11 | AND ABANDONMENT | |
| PULL OR ALTER CASING | | CASING TEST AND CE | (- | | |
| OTHER: | | OTHER: OAP | & AT | × | |
| Describe Proposed or Completed Operat work) SEE RULE 1103. | ions (Clearly state all pertinent details, an | d give pertinent dates, includ | ling estimated date of starting | з аку ргорозей | |
| 3-25 TO 3-30-93: | | | | | |
| POH W/INJ EQMT. CO W/BIT 8 4133' - 4240' & OH 4242' - 4 EQMT, SETTING GUIB UNI-VI PKF | 3181 W/3000 GAL 15% HCL N | NEEE エ うろりりみ ドレント | CALT BICT BUT | | |
| | | | | | |
| | | | | | |
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| | | | | | |

| I hereby certify that the information above is true and complete to the best of my knowle | edge and bei | id. | ······································ | |
|---|--------------|------------------------------|--|--------------------|
| SIGNATURE J. Marcus Winles | TILE | TECH. MANAGER - ASSET ADMIN. | DATE 5/12 | 2/93 |
| TYPE OR PRINT NAME J. L. MORRIS | | | TELEPHONE NO. | 713/544-37 |
| This space for State UseDRIGINAL MENSE BY JERRY SEXTON BESTIMEN 1 PURENTION | | | | A & 10, 4 |
| UPPROVED BY | — тпе. | | - DATE | an en akt sigten e |