

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.
7. Lease Name or Unit Agreement Name N. HOBBS (G/SA) UNIT SECTION 29
8. Well No. 321
9. Pool name or Wildcat HOBBS (G/SA)
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3652' DF

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 ☒ GAS WELL ☐ OTHER
2. Name of Operator Shell Western E&P Inc.
3. Address of Operator P.O. Box 576 Houston, TX 77001-0576
4. Well Location Unit Letter <u>G</u> : <u>2310</u> Feet From The <u>NORTH</u> Line and <u>1650</u> Feet From The <u>EAST</u> Line Section <u>29</u> Township <u>18S</u> Range <u>38E</u> NMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3652' DF

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	OTHER: <u>REPERF, WSO & ACD</u> ☒

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.

6-13 TO 6-24-91:

POH W/PROD EQMT. CO TO TOP OF 5 IN. LNR @ 3812' (SCRPR CLN). ESTAB INJ RT INTO LK'G 4-WAY SQZ HOLES @ 3895' & 4100'. SET CIBP @ 4124' & CIGR @ 3864'. SQZD W/100 SX CLS C CMT + 350 SCF/BBL N2 + 100 SX CLS C NEAT CMT + 50 SX CLS C CMT + 2% CACL2. TAG TOC @ 3858'. DO CMT & CIGR TO TOP OF CIBP @ 4124'. PT 4-WAY SQZ HOLES TO 500#. HELD. DRLD UP CIBP, PUSHED REMNANTS TO BTM. SET RBP @ 4293'. ACD PERFS 4137' - 4271' W/2000 GAL 15% NEFE HCL. PERF SA 4142' - 4234' (2 SPF). ACD PERFS 4137' - 4271' W/3300 INST PROD EQMT & RTP.

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 8/02/91
TYPE OR PRINT NAME J. H. SMITHERMAN TELEPHONE NO. 713/870-3797

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: