

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 <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name N. HOBBS (G/SA) UNIT
8. Well No. 231
9. Pool name or Wildcat HOBBS (G/SA)

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	2. Name of Operator Shell Western E&P Inc.
3. Address of Operator P.O. Box 576, Houston, TX 77001 (WCK 5237)	4. Well Location Unit Letter K : 2310 Feet From The SOUTH Line and 2310 Feet From The WEST Line Section 30 Township 18S Range 38E NMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3662' DF	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: TA'D ☒

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.

7-18 TO 7-19-94:

POH W/PROD EQMT. SET CIBP @ 4050' & CAPPED W/35' CMT. CIRC INHIB FL. PT CSG TO 500#
FOR 30 MIN, HELD. (CHART ATTACHED) SECURED WELL FOR TA STATUS. CLN LOC. WELL IS TA'D.

PURSUANT TO THE PROVISIONS OF NMOC D RULE 203, SHELL WESTERN HEREBY REQUESTS TEMPORARY
ABANDONMENT STATUS FOR A PERIOD OF FIVE YEARS.

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

SIGNATURE A. J. DURRANI TITLE TECH MGR - ASSET ADMIN. DATE 8/12/94
TYPE OR PRINT NAME A. J. DURRANI TELEPHONE NO. 713/544-3797

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE AUG 23 1994
CONDITIONS OF APPROVAL, IF ANY: _____