Submit 3 Copies to Appropriate

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088	WELL API NO.
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	7. Lease Name or Unit Agreement Name N. HOBBS (G/SA) UNIT
1. Type of Well: OIL GAS WELL OTHER INJECTOR	SEC 31
2 Name of Operator SHELL WESTERN E&P INC.	8. Well No.
3. Address of Operator	9. Pool name or Wildcat
P. O. BOX 576, HOUSTON, TX 77001 (WCK 4435) 4. Well Location	HOBBS (G/SA)
Unit Letter <u>F</u> : 1980 Feet From The <u>NORTH</u> Line and _	990 Feet From The WEST Line
Section 31 Township 18S Range 38E 10. Elevation (Show whether DF, RKB, RT, GR, et 3665 DF	NMPM F.A. County
11. Check Appropriate Box to Indicate Nature of Notice	• •
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR	ILLING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST A	ND CEMENT JOB
OTHER: OTHER:	ACD TREATMENT . [X]
 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. 7-2-85 PUMPED 1000 GAL 15% NEA DOUBLE FOLLOWED BY 20 BBLS. LET SOAK 1 HOUR. RETD TO INJ. 	
I hereby certify that the information above is true and complete to the best of my knowledge and belief. Signature PROD. ADM	MIN. ADVISOR MAY 0 3 1989
CALTUEDANA	(713) 870-3797 телерноме но.
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	MAY 8 1989
APPROVED BY TIME	DATE