

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO.
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER INJECTOR		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Shell Western E&P Inc.		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 576 Houston, TX 77001-0576		7. Lease Name or Unit Agreement Name N. HOBBS (G/SA) UNIT SECTION 32
4. Well Location Unit Letter <u>E</u> : <u>1370</u> Feet From The <u>NORTH</u> Line and <u>330</u> Feet From The <u>WEST</u> Line Section <u>32</u> Township <u>18S</u> Range <u>38E</u> NMPM LEA County		8. Well No. 112
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3642' DF		9. Pool name or Wildcat HOBBS (G/SA)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <u>ACD</u> <input checked="" type="checkbox"/>	

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.

8-01 TO 8-06-91:

POH W/INJ EQMT. TAG FILL @ 4204'. CO FILL TO 4225'. ACD SA PERFS 4126' - 4218' W/  
4200 GAL 15% NEFE HCL + 400# ROCK SALT. INST INJ EQMT, SETTING GUB UNI-VI PKR @  
4020'. PT ANN TO 300# FOR 30 MIN, HELD. RTI.

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 9/27/91  
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: