Submit 3 Copies to Appropriate

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

District Office	zaciej, minorais and ivaturai	rccources Department		Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO.	07621
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			3D-025- 5. Indicate Type of Lease	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No	re X
SUNDRY NOT	ICES AND REPORTS ON WEI	LLS		
(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.)			7. Lease Name or Unit Agre N. HOBBS (G/SA)	
1. Type of Well: OIL GAS WELL X WELL	OTHER		N. 115555 (4754)	ONII
2. Name of Operator			8. Weil No.	
Shell Western E&P, Inc 3. Address of Operator	•		441	
P. O. BOX 576 (WCK	5237), HOUSTON, TX 7	7001	9. Pool name or Wildcat HOBBS (G/SA)	
4. Well Location Unit Letter P: 660	Feet From The SOUT	TH Line and	660 Feet From The	EAST Line
Section 32		Range 38E her DF, RKB, RT, GR, et 3642' GR	NMPM c.)	LEA County
11. Check Ap	propriate Box to Indicate		Report, or Other D	ata
	NTENTION TO:	1	SEQUENT REPO	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	☐ ALTERIN	G CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING		ID ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CE	[1	
OTHER:		OTHER:	SET_RBP_FOR_WSO	[X
12. Describe Proposed or Completed Ope work) SEE RULE 1103.	erations (Clearly state all pertinent de	etails, and give pertinent da	tes, including estimated date of	of starting any proposed
6-06 TO 6-10-94:				
POH W/PROD EQMT. TA 500#, BLED OFF 150#	AG BTM @ 4242'. SET RBP @ IN 5 MIN. REL PKR & POH.	4179'. SET PKR @ INST PROD EQHT &	4173'. PT RBP TO RTP.	
I hereby certify that the information above is t				
SIGNATURE / Marco	Winder TI	TLEMGR ASSET_A	ADMIN DATE	4/26/95
TYPE OR PRINT NAME JOIG S. NA				ENO. 713/544-3797
DIS	SIGNED BY JERRY SEXTON TRICT J SUPERVISOR			MAY 01 159
CONDITIONS OF APPROVAL IF ANY	TI	TLE	DATE	· · · · · · · · · · · · · · · · · · ·