STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION	1 1	
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FILE		
U.S.G.S.		
LAND DEFICE	1_	
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OIL CONSERVATION DIVISION - PO BOX 2088

Form C-103 Revised 10-1478

	- PO BOX 2086	Revised to-1470		
DISTRIBUTION	SANTA FE, NEW MEXICO 87501			
SANTAFE	SANTA	5a. Indicate Type of Lease		
FILE		State XX Fee		
U.S.O.S.		5. State Oll & Gas Lease No.		
LAND OFFICE		5. State on s		
OPERATOR		mmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmm		
	HOTICES AND DEPORTS ON WELLS			
SUNDRY NOTICES AND REPORTS ON WELLS 100 NOT USE THIS FORM FOR PROPOSALS TO ORILL OR TO DEEPLH OR PLUC BACK TO A DIFFERENT PESERVOIR.		AVOIR.		
100 HOT USE THIS FORM PER STORE	FOR PERMIT _ FORM C-1017, 0	7. Unit Agreement Name		
1.		N. Hobbs (G/SA) Unit		
WELL WELL	OTHER-	8. Farm or Lease Name		
2. Name of Operator		Section 32		
Shell Oil <u>Compa</u>	iny	9, Well No.		
3. Address of Operator		331		
P.O. Box 991	Houston, Texas 77001	10. Field and Pool, or Wildcat		
.1 231	10 FEET FROM THE SOUTH LINE AND 2310	FEET FROM THE THOMESTAY SA		
UNIT LETTER				
025+	32 TOWNSHIP 18-5 RANGE 38-	E		
THE LINE, SECTION_	TOWNSHIP	711111111111111111111111111111111111111		
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County		
	3642' GR	Lea		
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Och up Data		
Check Ap	opropriate Box To Indicate Nature of Notice. I	(eport of Other Data		
NOTICE OF INT	ENTION TO:	SUBSEQUENT REPORT OF:		
110 110 = 1		ALTERING CASING		
[PLUG AND ABANDON REMEDIAL WORK			
PIRFORM REMEDIAL WORK	COMMENCE DRILLING D	PNS. PLUG AND ABANDOHMENT		
TEMPERATILY ABAHDON	CHANGE PLANS CASING TEST AND CEME	EDL TH		
PULL OR ALTER CASING	PANTO			
Out and ditional na	v and acidize			
Open additional pa	y and derated			
Completed Cities	rations (Clearly state all pertinent details, and give pertinent	dates, including estimated date of starting any propose		
17. Describe Proposed of Completed Open work) SEE RULE 1103.				
1 Deeper to	4261'±.			

- 1. Deeper to 4261'±.
- 2. Spot 200 gal. 15% HCl-NEA across zone to be perf'd.
- 3. Perforate 4040'-4240' (44'-88 holes).
- 4. Acid treat perforations w/ 10,000 gal. 15% HCl-NEA.
- 5. Re-run production equipment and return well to production.

16. I hereby certify that the information above is true and complete	title Supervisor Reg. & Permitting	June 23, 1982
ORIGINAL SIGNED BY JERRY SEXTON CONDITIONS OF APPROPRIATE ANYSUPR.	TITLE	JUN 28 1982