

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-07564
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. 211
9. Pool name or Wildcat HOBBS (G/SA)

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3647' GR

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 ATTN: S.A. Galik-5239 WCK
4. Well Location Unit Letter C : 330 Feet From The NORTH Line and 2310 Feet From The WEST Line Section 33 Township 18S Range 38E NMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3647' GR

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: **Acidize** ☒

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.

1-10-95:

POOH W/PROD EQUIP. SET PKR AT 4050'. ACIDIZE W/2500 GAL 15% HCL
AND 1700 LBS ROCK SALT. POOH W/PKR.
RTI.

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

SIGNATURE *Shirley A. Galik* TITLE MGR - REG. & PERMITTING DATE 8/31/95
TYPE OR PRINT NAME FOR: G. S. NADY TELEPHONE NO. 713/544-4219

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE **OCT 11 1995**

CONDITIONS OF APPROVAL, IF ANY:

