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

WELL API NO.

5. Indicate Type of Lease STATE [X] FEE [ ]

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 A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name
N. HOBBS (G/SA) UNIT SECTION 23

1. Type of Well: OIL WELL [ ] GAS WELL [ ] OTHER INJECTOR

2. Name of Operator
SHELL WESTERN E&P INC.

8. Well No.
411

3. Address of Operator
P. O. BOX 576, HOUSTON, TX 77001 (WCK 4435)

9. Pool name or Wildcat
HOBBS (G/SA)

4. Well Location
Unit Letter A : 300 Feet From The NORTH Line and 330 Feet From The EAST Line

Section 23 Township 18S Range 37E NMPM LEA County

10. Elevation (*Show whether DF, RKB, RT, GR, etc.*)
3686' DF

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]	CHANGE PLANS [ ]	COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]		CASING TEST AND CEMENT JOB [ ]	
OTHER: [ ]		OTHER: Profile Correction [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.

6-28 to 7-05-88:
POH w/inj equip. CO to 4107' (PBTD). Set cmt ret @ 3817'. Sqzd Grayburg OH 3915' - 4107' w/75 sx Cls "C" cmt + 2% $CaCl_2$ + .03% Halad-4. DO cmt ret & fell to 4057', pushed to 4102'. Circ'd hole clean. Tagged @ 4109'. PB to 4093' w/hydromite. Perf'd Grayburg OH 4002'-72' (2 JSPF). Acd OH 3915' - 4093' w/2000 gals 15% HCl-NEA + 200# rock salt. Installed inj equip, setting Guib Uni-Pkr VI @ 3838'. Pres tstd csg to 500# for 15 min, held OK. Retd well to inj.

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

SIGNATURE A. J. Fore TITLE SUPERVISOR REG. & PERMITTING DATE 1-18-89

TYPE OR PRINT NAME A. J. FORE (713) 870-3797 TELEPHONE NO.

(This space for State Use)
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JAN 23 1989

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JAN 23 1989

OCD
HOBBS OFFICE