

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.

30-025-23007

5. Indicate Type of Lease

STATE ☐

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.)

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

2. Name of Operator

Shell Western E&P Inc.

3. Address of Operator

P.O. Box 576 Houston, TX 77001-0576

(WCK 4435)

8. Well No.

121

9. Pool name or Wildcat

HOBBS (G/SA)

4. Well Location

Unit Letter E : 1730 Feet From The NORTH Line and 330 Feet From The WEST Line

Section 32 Township 18S Range 38E NMPM LEA County

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

3647' DF

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: WSO OR OAP/AT & ZN TST ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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. POH W/PROD EQUIP.

2. CO TO PBTD @ 4220'.

3. SET RBP @ 4050'+/- . PT RBP & CSG TO 500# FOR 15 MIN. SET PKR ABV RBP & TST.  
IF PT FAILS, ENGR WILL BE NOTIFIED.

4. REL RBP & PKR. RESET RBP @ 4100' (+/-5'). RESET PKR @ 4050'+/- . PT SQZD SA PERFS  
4088-90' TO 500# FOR 15 MIN. IF PT FAILS, ENGR WILL BE NOTIFIED & REMAINING  
PROCEDURES DISCONTINUED. (WILL OPT FOR EITHER A CMT SQZ OR CSG PATCH OVER POSS LK.)

5. REL RBP & PKR, POH.

6. SET CIBP @ 4060'(+/-5'). PT CIBP TO 500# FOR 5 MIN.

7. IF PT OK, SPOT 300 GALS 15% NEFE HCL ABV CIBP.

8. PERF SA 4028-42' (2 JSPF).

9. ACDZ PERFS 4020-42' W/2400 GALS 15% NEFE HCL.

10. INST PROD EQUIP & RET WELL TO PROD.

see correction 4028'

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 4/24/91

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: