State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I	OIL CONSERV	ATION DIVISI	ON					
P.O. Box 1980, Hobbs, NM 88240	310 Old Santa Fe Trail, Room 206 Santa Fe, New Mexico 87503			WELL API NO. 30-025-09932				
					5. Indicate Type of Lease			
				FED STA	TE X	FEE		
			l l	6. State Oil & Gas Lease No.				
ary more visit	FIGURE AND DEPONDED ON THE LE			A-1118				
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"				7. Lease Name or Unit Agreement Name				
(FORM C-101 FOR SUCH PROPOSALS)				SHELL A STATE				
1. Type of Well:								
Oil Well X	Gas Well Other							
2. Name of Operator			8. W	ell No. 7	-			
SHELL WESTERN E&P INC 3. Address of Operator	·	······································	0.0	1				
•	OX 1950, HOBBS, NM 88240 505/393-0325			9. Pool name or Wildcat HOBBS - LOWER BLINEBRY				
4. Well Location								
II '11 11 11 1000								
Unit Letter H : 1930	Feet From The NORTH	Line and 660	Feet From	The <u>EAST</u>	Line			
Section 32	Township 18-S	Range	38-E	NMPM	LEA	County		
	10. Elevation (Show whether DF, I							
	3646' DF							
	ck Appropriate Box to Indicate	Nature of Notice, F						
NOTICE OF INT	ENTION TO:		SUBSEQU	JENT REPORT (OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERI	NG CASING			
TEMPORARILY ABANDON X	CHANGE PLANS	COMMENCE DRILLI	NG OPNS.	PLUGA	ABANDON	MENT		
PULL OR ALTER CASING		CASING TEST AND			, , , , , , , , , , , , , , , , , , , ,			
	[]	OTHER:	JENIENI JOB	L		_		
12. Describe Proposed or Completed Operation (Completed Operation) SEE RULE 1103.	tions (Clearly state all pertinent detail	s, and give pertinent da	tes, including e	stimated date of start	ne and brob	osed		
WORK SEEROLE 1103.								
09/10/96 - 09/18/96								
POH W/PROD EQUIPMENT. SET O				30 MIN AND				
CHART FOR THE NMOCD. CIRC	CSG WANHIBITED FLUID. SE	CURE WELL FOR T.	A STATUS.					
PURSUANT TO THE PROVISIONS	OF NMOCD RULE 203 SHELL	. Western hereb	Y REQUESTS	3				
TEMPORARY ABANDONMENT A				•				
I hereby certify that the information above	is true and complete to the best of my k	nowledge and belief						
A 1 2								
SIGNATURE (2.7%)	an	TITLE PRODU	ICTION FOR	EMAN D	ATE 09/0	13 /96		

TITLE

TITLE PRODUCTION FOREMAN

CONDITIONS OF APPROVAL IF ANY:

TYPE OR PRINT NAME (This space for State Use)

APPROVED BY

C. L. MANN

DATE

TELEPHONE NO.

505/393/1425