State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I

CONDITIONS OF APPROVAL IF ANY:

OIL CONSERVATION DIVISION

P.O. Box 1980, Hobbs, NM 8824		e Trail, Room 206 Mexico 87503	WELL API NO. 30-025-25775 , 23 7 25 30-025-09932	
	Dana 10, 110	Mexico 07505	5. Indicate Type of Leas	
				ATE FEE X
			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			7. Lease Name or Unit A	_
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" FORM C-101 FOR SUCH PROPOSALS)			NORTH HOBBS UN SECTION 27	IT
1. Type of Well:				
Oil Well	Gas Well Other II	IJECTOR	8. Well No. 111	
2. Name of Operator SHELL WESTERN E&P INC.			8. Well No. 111	
3. Address of Operator P. O. BOX 1950, HOBBS, NM 88240 505/393-0325			9. Pool name or Wildcat HOBBS (C/SA)	
4. Well Location	DDB, 14141 66240 303/3/3		1 HODDS (GISA)	
Unit Letter D :	1200 Feet From The NORTH	Line and 470 Feet	t From The WEST	Line
Oint Dester	1200 1000 III III III			
Section 27	Township 18-S 10. Elevation (Show whether DF, F	Range 38-E	NMPM	LEA County
	3641' DF	wolth out end		
11.	Check Appropriate Box to Indicate 1			***************************************
NOTICE	OF INTENTION TO:	SUB	SEQUENT REPORT	OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTE	RING CASING
TEMPORARILY ABANDON	X CHANGE PLANS	COMMENCE DRILLING OPN	S. PLUG	& ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CEMENT	I JOB	
OTHER: Adjust Injection	Profile	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.				
09/10/96 - 09/18/96				
POH W/INJ EQUIPMENT. SET CIBP @ 4100' AND CAP W/35' CMT. TEST CSG TO 500 PSI FOR 30 MIN AND CHART FOR THE NMOCD. CIRC CSG W/INHIBITED FLUID. SECURE WELL FOR TA STATUS.				
CHART FOR THE NMOCD. CIRC CSG WINNIBITED FLOID. SECORE WELL FOR TA STATUS.				
PURSUANT TO THE PROVISIONS OF NMOCD RULE 203. SHELL WESTERN HEREBY REQUESTS TEMPORARY ABANDONMENT APPROVAL FOR A PERIOD OF FIVE YEARS.				
I heraby certify that the information	tion above is true and complete to the best of my k	nowledge and belief.		
SIGNATURE	1. Mann	TITLE PRODUCTION	N FOREMAN	DATE 09/03/96
TYPE OR PRINT NAME C	. L. MANN		TELEPHONE	NO. 505/393/1425
(This space for State Use)	TO THE STATE OF THE SECTION			_
APPROVED BY	······································		DATE	SEP 06 1996