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. 30-025-23481

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.)

7. Lease Name or Unit Agreement Name

N. HOBBS (G/SA) UNIT
SECTION 19

1. Type of Well:
OIL WELL ☒   GAS WELL ☐   OTHER

2. Name of Operator
Shell Western E&P Inc.

8. Well No.
242

3. Address of Operator   (WCK 4435)
P.O. Box 576 Houston, TX 77001-0576

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

4. Well Location

Unit Letter N : 420 Feet From The SOUTH Line and 1980 Feet From The WEST Line

Section 19   Township 18S   Range 38E   NMPM   LEA   County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3666 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: OAP & ACD ☒

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.

8-14 to 8-17-90:

POH W/PROD EQUIP. TAG BTM @ 4181'. CO TO 4181'. SET RBP @ 4082'. PT CSG TO
500#, HELD. SPOT 2 BBLS 15% NEFE HCL ABV RBP. PERF'D G/SA 4020'-58' (2 JSPF).
ACD PERFS 4020'-58' W/2200 GALS 15% NEFE HCL. REL RBP & POH. INST PROD EQUIP &
RETD TO PROD.

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

SIGNATURE _____   TITLE REGULATORY SUPV.   DATE 1-18-91

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: