

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

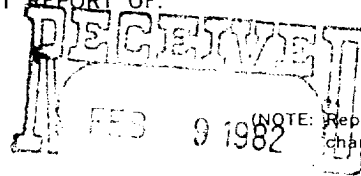
1. oil ☐ well ☐ gas well ☐ other ☒ INJECTOR
2. NAME OF OPERATOR
SHELL OIL COMPANY
3. ADDRESS OF OPERATOR
P. O. BOX 991, HOUSTON, TX 77001
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1623 FSL & 1218 FWL, SEC. 29, T-18-
AT TOP PROD. INTERVAL: SAME R-38-E
AT TOTAL DEPTH: SAME
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) COMPLETE AS AN INJECTOR ☒

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
☐
☐
☐
☒



5. LEASE
LC 032233 (a)
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
N. HOBBS (G/SA) UNIT
8. FARM OR LEASE NAME
SECTION 29
9. WELL NO.
132
10. FIELD OR WILDCAT NAME
HOBBS (G/SA)
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SECTION 29, T-18-S, R-38-E
12. COUNTY OR PARISH
LEA
13. STATE
NM
14. API NO.
30-025-26917
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3641.35' GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

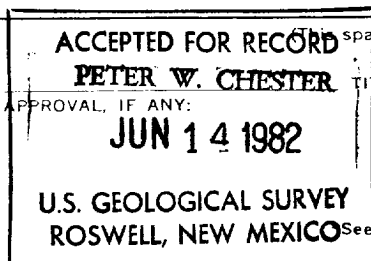
1-23-82: Ran injection equipment. Set 5 1/2" Guiberson Uni-Pkr VI @3974' w/ 8,000# tension. Profile nipple @3972'. Pressure tested donut, 5 1/2" csg, and pkr to 500# - held OK. Well complete for injection.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED A. J. FORE A. J. FORE TITLE SUPERVISOR REGULATORY & PERMITTING DATE FEBRUARY 3, 1982

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:



(space for Federal or State office use)

DATE _____

See Instructions on Reverse Side