STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State [ ] Fee [X]

5. State Oil & Gas Lease No.

API #30-025-27139

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.)

OIL WELL [ ] GAS WELL [ ] OTHER- INJECTOR

7. Unit Agreement Name: N. HOBBS (G/SA) UNIT

2. Name of Operator: SHELL WESTERN E&P INC.

8. Farm or Lease Name: SECTION 32

3. Address of Operator: P. O. BOX 576, HOUSTON, TEXAS 77001 (WCK 4435)

9. Well No.: 132

4. Location of Well: UNIT LETTER L, 1400 FEET FROM THE SOUTH LINE AND 1300 FEET FROM THE WEST LINE, SECTION 32 TOWNSHIP 18-S RANGE 38-E NMPM.

10. Field and Pool, or Wildcat: HOBBS (G/SA)

15. Elevation (Show whether DF, RT, GR, etc.): 3629' GL

12. County: LEA

6. 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 [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
		OTHER [ ]	
OTHER SQZ & ACIDIZE [X]			

7. 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. Pull injection equipment.
2. Set CIBP @ 4115' & CICR @ 3980'.
3. Sqz San Andres perfs 4092' - 4097' w/75 sx Class "C" cmt + .2% Halad-4 + 2% $CaCl_2$. WOC 24 hrs.
4. Drill out CICR and cmt to 4110'.
5. Pres tst sqzd perfs 4092' - 4097' to 1000#.
6. Drill out cmt & CIBP @ 4115'. Tag btm.
7. Run csg inspection log from TD to 3000' & repeat from TD to 4000'.
8. Acidize San Andres perfs 4128' - 4254' w/600 gals 15% HCl-NEA + 70 gals xylene + 14# citric acid/1000 gals.
9. Install injection equipment and return well to injection.

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

SIGNED E. Curtis for A. J. FORE TITLE SUPERVISOR REG. & PERMITTING DATE APRIL 17, 1986

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE _____ DATE APR 23 1986