Submit 3 Copies to Appropriate District Office

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

WELL API NO.

P.O. Box 1980, Hobbs, NM 88240			30-025 27198			
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE FEE X			
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Le	ase 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"			7. Lease Name or Uni	t Agreement Name		
(FORM C-101) FOR SUCH PROPOSALS.)			N. HOBBS (G/SA) UNIT			
1. Type of Well:			SEC 18			
WEIL WEIL	OTHER INJECT	OR	8. Well No.			
2 Name of Operator SHELL WESTERN E&P INC.			242			
3. Address of Operator			9. Pool name or Wildcat			
P. O. BOX 576, HOUSTON	, TX 77001 (WCK 4	435)	HOBBS (G/S	SA)	-	
4. Well Location Unit LetterN:1200	Feet From The SOUTH	Line and2600	Feet From Th	e WEST	Line	
Section 18	Township 18S Ra		NMPM LEA		County	
	10. Elevation (Show whether 1 3665.	39' GR				
	propriate Box to Indicate I	Nature of Notice, Re	eport, or Other D	ata		
NOTICE OF INTENTION TO:			SEQUENT REI	PORT OF:	_	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	AL	TERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. DPL	UG AND ABANDO	ONMENT 🔲	
PULL OR ALTER CASING		CASING TEST AND CE			-14-	
OTHER:		OTHER: ACD TR	REATMENT			
12. Describe Proposed or Completed Operations	i (Clearly state all pertinent details, ar	d give pertinent dates, inclu	ding estimated date of su	arting any proposed		
work) SEE RULE 1103.						
9-24-84						
PUMPED 1000 GAL 15% NE H	CL DOWN TBG. RETD TO	INJECTION.		•		
9-26-85		•				
	or poly the RETE TO	TAL IFOTTON				
PUMPED 1000 GAL 15% NE H	JL DOWN IBG. REID TO	INJECTION.				
		I L. V. F				
I hereby certify that the information above is true and	I complete to the best of my knowledge and	ne PROD. ADMIN.	ΔηντςΩΡ	5~1·	-89	
SIGNATURE	he produce T	•		_ DAIL		
TYPE OR PRINT NAME J. H. SMITHE	<u>IRMAN</u>	(7	13) 870-3797	TELEPHONE NO.	1 42.2.2	
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON				MAY	4 1989	
DISTRICT I SUPERVISOR				DATE		
ADDROGUETO BY	π	ILE				

MAY 3 1999

THE REPORT OF THE STREET