

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

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

Form C-103
Revised 10-1-75

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

API #30-025-28886

5a. Indicate Type of Lease
State ☒ Fee ☐
5. 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.)

1. CIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name N. HOBBS (G/SA) UNIT
2. Name of Operator SHELL WESTERN E&P INC. (4431 WCK)	8. Farm or Lease Name SECTION 30
3. Address of Operator P.O. BOX 576, HOUSTON, TEXAS 77001	9. Well No. 242
4. Location of Well UNIT LETTER <u>N</u> <u>200</u> FEET FROM THE <u>SOUTH</u> LINE AND <u>1400</u> FEET FROM THE <u>WEST</u> LINE, SECTION <u>30</u> TOWNSHIP <u>18-S</u> RANGE <u>38-E</u> NMPM.	10. Field and Pool, or Widest HOBBS (G/SA)
15. Elevation (Show whether DF, RT, GR, etc.) 3650.4' GL	12. County LEA

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER OAP/AT ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPER. ☐
CASING TEST AND CEMENT JOB ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
OTHER ☐

17. 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) POOH w/ prod equip.
- 2) CO to 4160'.
- 3) Set CIBP @ 4150'.
- 4) Perf San Andres 4093' - 4107' w/ 2JSPF.
- 5) AT San Andres 4093' - 4107' w/ 800 gals 15% HCl + 24 ball sealers using pkr.
- 6) RIH w/ prod equip and return well to production.

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

SIGNED A. J. FORE TITLE SUPERVISOR REG. & PERMITTING DATE DEC 29 1988

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JAN 04 1989

CONDITIONS OF APPROVAL, IF ANY: