

DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)  
BUREAU OF LAND MANAGEMENT

REVISED AUGUST 31, 1983

5. LEASE DESIGNATION AND SERIAL NO.

LC 032233(a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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--" for such proposals.)

1. OIL WELL  GAS WELL  OTHER  FEB 1 2 23 PM '89

2. NAME OF OPERATOR SHELL WESTERN E&P INC. (4431 WCK) CARL AREA

3. ADDRESS OF OPERATOR P.O. BOX 576 HOUSTON, TX 77001

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 215' FSL & 1255' FEL

7. UNIT AGREEMENT NAME

N. HOBBS (G/SA) UNIT

8. FARM OR LEASE NAME

SECTION 30

9. WELL NO.

444

10. FIELD AND POOL, OR WILDCAT

HOBBS (G/SA)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

SEC. 30, T18S, R38E

14. ~~XXXXXX~~ API NO. 30-025-28959

15. ELEVATIONS (Show whether OF, RT, CR, etc.) 3644.5' GL

12. COUNTY OR PARISH

LEA

13. STATE

NEW MEXICO

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF   
FRACTURE TREAT   
SHOOT OR ACIDIZE   
REPAIR WELL   
(Other)

PULL OR ALTER CASING   
MULTIPLE COMPLETE   
ABANDON\*   
CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF   
FRACTURE TREATMENT   
SHOOTING OR ACIDIZING   
(Other) OAP, AT

REPAIRING WELL   
ALTERING CASING   
ABANDONMENT\*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)

10-18-88 thru 10-20-88:

POOH w/ prod equip. CO to RBP @ 4145'. Perf San Andres 4112' - 4131' w/ 2JSPF. AT San Andres 4112' - 4131' w/ 1000 gals 15% HCl acid + 300# rock salt, using pkr set @ 4075'. Release pkr. RIH w/ prod equip. Returned well to prod 10-20-88.

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

SIGNED *A. J. Fore* A. J. FORE

TITLE SUPERVISOR REG. & PERMITS

DATE JAN 30 1989

(This space for Federal or State office use)

RECORDED FOR RECORD

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE

JAN 30 1989

SJS

\*See Instructions on Reverse Side

NEW MEXICO